


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 29, 2007 08:00 AM
Secretary of State

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| DOCUMENT # N16926 1. Entity Name GALLERY PLAZA, INC. |  |
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| Principal Place of Business 3502 ACCESS RD UNIT 10 ENGLEWOOD, FL 34224 US | Mailing Address 3502 ACCESS RD UNIT 10 ENGLEWOOD, FL 34224 US |
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01122007 No Chg-NP CR2E037 (4/06)

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| 4. FEI Number 59-2727227 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent BOGER, STEVE 3502 ACCESS RD N. UNIT 10 ENGLEWOOD, FL 34224 |
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

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| Filing Fee is \$61.25 Due by May 1, 2007 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BERTLER, RITA 3502 N. ACCESS RD #1 ENGLEWOOD, FL 34224 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP WICKS, CINDY 3502 N ACCESS RD #7 ENGLEWOOD, FL 34224 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BOGER, STEVE 3502 N ACCESS RD #1 ENGLEWOOD, FL 34224 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD MANNION, JOHN 3502 N. ACCESS RD # 11 ENGLEWOOD, FL 34224 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T BERTLER, RICHARD T 3502 N ACCESS RD ENGLEWOOD, FL 34224 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P MAZUR, JEFF 3502 N ACCESS RD #8 ENGLEWOOD, FL 34224 |

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01/31/07-80011-010 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rita Bertler, Rita Bertler, Director 1/26/07 941-475-7006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #