

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N16926**

1. Entity Name  
**GALLERY PLAZA, INC.**



Principal Place of Business  
**3502 ACCESS RD  
UNIT 10  
ENGLEWOOD, FL 34224 US**

Mailing Address  
**3502 ACCESS RD  
UNIT 10  
ENGLEWOOD, FL 34224 US**



01032008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2727227**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BOGER, STEVE  
3502 ACCESS RD N.  
UNIT 10  
ENGLEWOOD, FL 34224**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000795650  
01/28/08-80056-009 61.25

**10. OFFICERS AND DIRECTORS**

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**

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Richard T. Bertler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Jan 21/08* 941 4749154  
Date Daytime Phone #