

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000045722 (2)

1. Corporation Name

CHERYL GALLERIES, INC.



Principal Place of Business

222 LAKEVIEW AVENUE  
SUITE 260  
WEST PALM BEACH FL 33401

Mailing Address

222 LAKEVIEW AVENUE  
SUITE 260  
WEST PALM BEACH FL 33401

2. Principal Place of Business

21. PGA Galleries

22. 2602 P.G.A Blvd.

23. Palm Beach Gardens FL

24. 33410

25. USA

2a. Mailing Address

26. 2602 PGA Blvd.

Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

30. Country

3. Date Incorporated or Qualified

06/13/1995

3a. Date of Last Report

4. FEI Number

65-0586220

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

KOEPEL, JOEL P  
222 LAKEVIEW AVENUE  
SUITE 260  
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE 2/1/96

12. OFFICERS AND DIRECTORS

1. TITLE ☒ DELETE

NAME D KOEPEL, JOEL P  
STREET ADDRESS 222 LAKEVIEW AVENUE SUITE 260  
CITY-ST-ZIP WEST PALM BEACH FL 33401

2. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

7. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

8. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE Cheryl Daniels (P) ☒ Change ☐ Addition

2. 2. NAME 2602 P.G.A Boulevard  
3. 3. STREET ADDRESS Palm Beach Gardens, FL 33418  
4. 4. CITY-ST-ZIP

5. 5. TITLE ☐ Change ☐ Addition

6. 6. NAME ☐ Change ☐ Addition

7. 7. STREET ADDRESS ☐ Change ☐ Addition

8. 8. CITY-ST-ZIP ☐ Change ☐ Addition

9. 9. TITLE ☐ Change ☐ Addition

10. 10. NAME ☐ Change ☐ Addition

11. 11. STREET ADDRESS ☐ Change ☐ Addition

12. 12. CITY-ST-ZIP ☐ Change ☐ Addition

13. 13. TITLE ☐ Change ☐ Addition

14. 14. NAME ☐ Change ☐ Addition

15. 15. STREET ADDRESS ☐ Change ☐ Addition

16. 16. CITY-ST-ZIP ☐ Change ☐ Addition

17. 17. TITLE ☐ Change ☐ Addition

18. 18. NAME ☐ Change ☐ Addition

19. 19. STREET ADDRESS ☐ Change ☐ Addition

20. 20. CITY-ST-ZIP ☐ Change ☐ Addition

21. 21. TITLE ☐ Change ☐ Addition

22. 22. NAME ☐ Change ☐ Addition

23. 23. STREET ADDRESS ☐ Change ☐ Addition

24. 24. CITY-ST-ZIP ☐ Change ☐ Addition

25. 25. TITLE ☐ Change ☐ Addition

26. 26. NAME ☐ Change ☐ Addition

27. 27. STREET ADDRESS ☐ Change ☐ Addition

28. 28. CITY-ST-ZIP ☐ Change ☐ Addition

29. 29. TITLE ☐ Change ☐ Addition

30. 30. NAME ☐ Change ☐ Addition

31. 31. STREET ADDRESS ☐ Change ☐ Addition

32. 32. CITY-ST-ZIP ☐ Change ☐ Addition

33. 33. TITLE ☐ Change ☐ Addition

34. 34. NAME ☐ Change ☐ Addition

35. 35. STREET ADDRESS ☐ Change ☐ Addition

36. 36. CITY-ST-ZIP ☐ Change ☐ Addition

37. 37. TITLE ☐ Change ☐ Addition

38. 38. NAME ☐ Change ☐ Addition

39. 39. STREET ADDRESS ☐ Change ☐ Addition

40. 40. CITY-ST-ZIP ☐ Change ☐ Addition

SIGNATURE:

Cheryl K. Daniels 2/1/96 (407) 624-3220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)