2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000005880

City-St-Zip:

FORT LAUDERDALE, FL 33301

Entity Name: FLORIDA COLLECTORS GALLERY, INC

FILED Mar 22, 2008 Secretary of State

	iidi Teorribi	TOOLLES FOR ONLLEIN, III	10.				
Current Principal Place of Business:				New Principal Place of Business:			
1314 E. LAS OLAS BOULEVARD			1314 E. LAS OLAS BOULEVARD				
#182 LAUDERDALE BY THE SEA, FL 33308			#182 FT. LAUDERDALE, FL 33301				
Current Ma	ailing Addre	ss:		New Mailing Addres	is:		
1314 E. LAS OLAS BOULEVARD FT. LAUDERDALE, FL 33301				1314 E. LAS OLAS BOULEVARD #182 FT. LAUDERDALE, FL 33301			
FEI Number:	65-0639219	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certif	icate of Status Desired ()	
Name and	Address of 0	Current Registered Agent:		Name and Address	of New R	egistered Agent:	
LOCHRIE, JR, ROBERT B 1701 BRICKELL DR FT. LAUDERADLE, FL 33301 US				LOCHRIE, JR, ROBERT B 1617 S.E. 2ND STREET FT. LAUDERADLE, FL 33301 US			
The above in the State	named entity of Florida.	submits this statement for the p	purpose o	f changing its registere	ed office o	r registered agent, or both,	
SIGNATURE: ROBERT B. LOCHRIE, JR.				03/22/2008			
	Electro	nic Signature of Registered Ag	ent			Date	
Election Cam	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	AND DIREC	TORS:		ADDITIONS/CHANG	ES TO OI	FFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (LOCHRIE, ROI 1617 S. E. 2NI FT. LAUDERD	STREET		Title: Name: Address: City-St-Zip:	() Change	e () Addition	
Title: Name: Address: City-St-Zip:	LOCHRIE, GLE	TON AVENUE # 2318		Title: Name: Address: City-St-Zip:	() Change	e () Addition	
Title: Name: Address:	VP (LOCHRIE, SUS 1617 S. E. 2NI			Title: Name: Address:	() Change	e () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROBERT B. LOCHRIE, JR. PD 03/22/2008