2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# P96000005880

Entity Name: FLORIDA COLLECTORS GALLERY, INC.

Current Principal Place of Business:

1314 E. LAS OLAS BOULEVARD
#182
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

1314 E. LAS OLAS BOULEVARD
#182
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-0639219 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOCHRIE, JR, ROBERT B
1617 S.E. 2ND STREET
FT. LAUDERADLE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LOCHRIE, ROBERT B JR
Address: 1617 S. E. 2ND STREET
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VPD ( ) Delete
Name: LOCHRIE, GLENN
Address: 110 WASHINGTON AVENUE # 2318
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete
Name: LOCHRIE, SUSAN
Address: 1617 S. E. 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: LOCHRIE, GLENN
Address: 1316 S. E. 5 CT.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VP (X) Change ( ) Addition
Name: LOCHRIE, SUSAN
Address: 1617 S. E. 2ND ST.
City-St-Zip: FT. LAUDERDALE, FL 33301

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.

SIGNATURE: ROBERT B. LOCHRIE, JR. PD 04/16/2009

Electronic Signature of Signing Officer or Director Date