

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 680302

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: M H REALTY ASSOCIATES, INC.

## Current Principal Place of Business:

154 NW MAGNOLIA LAKES BLVD.  
PORT ST. LUCIE, FL 34986 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 881237  
PORT ST. LUCIE, FL 34988 US

## New Mailing Address:

FEI Number: 59-2017828

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOTZ MARK  
154 NW MAGNOLIA LAKES BLVD.  
PORT ST. LUCIE, FL 34986 US

## Name and Address of New Registered Agent:

GOTZ, MARK H MARK GO  
154 NW MAGNOLIA LAKES BLVD.  
PORT ST. LUCIE, FL 34986 US

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: MARK GOTZ

03/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: GOTZ, MARK,  
Address: 154 NW MAGNOLIA LAKES BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: GOTZ, MARK M MARK GO  
Address: 154 NW MAGNOLIA LAKES BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VP ( ) Change (X) Addition  
Name: GOTZ, MARY L  
Address: 154 NW MAGNOLIA LAKES BLVD.  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: MARK GOTZ

PRES

03/12/2009

Electronic Signature of Signing Officer or Director

Date