

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L69126

Entity Name: M.E. GOOD REALTY, INC.

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1231 SE PORT ST LUCIE BLVD  
PORT SAINT LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

1231 SE PORT ST LUCIE BLVD  
PORT SAINT LUCIE, FL 34952 US

**New Mailing Address:**

FEI Number: 65-0203234

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WHALEN, TIMOTHY L.  
SUITE 850  
400 AUSTRALIAN AVENUE SOUTH  
WEST PALM BEACH, FL 33401 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

**OFFICERS AND DIRECTORS:**

Title: PDS  
Name: GOOD, MARGARET  
Address: 4276 SW BIMINI CIRCLE SOUTH  
City-St-Zip: PALM CITY, FL 34990 US

Title: T  
Name: GOOD, MARGARET  
Address: 4276 SW BIMINI CIRCLE SOUTH  
City-St-Zip: PALM CITY, FL 34990 US

I hereby 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 all other like empowered.

SIGNATURE: MARGARET E, GOOD

PDS

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date