

FILED  
Apr 16, 2003 8:00 am  
Secretary of State

04-16-2003 90116 021 \*\*\*158.75

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000025909

1. Entity Name  
MKS COMMERCIAL REALTY, INC.



Principal Place of Business  
5260 UNIVERSITY BLVD., STE. 203  
WINTER PARK, FL 32792

Mailing Address  
3260 UNIVERSITY BLVD., STE. 203  
WINTER PARK, FL 32792

10074480

2. Principal Place of Business  
3300 University Blvd  
Suite 218

3. Mailing Address  
3300 University Blvd  
Suite 218



City & State  
Winter Park, FL  
Zip  
32792 Country  
USA

City & State  
Winter Park, FL  
Zip  
32792 Country  
USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number  
59-3645229

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

HADDOCK, EDWARD E JR  
3260 UNIVERSITY BLVD., STE. 203  
WINTER PARK, FL 32792

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
3300 University Blvd,  
Suite 218  
Winter Park FL 32792

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Edith K. Murphy*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/10/03  
DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PSD	MURPHY, EDITH K	641 PINETREE ROAD	WINTER PARK, FL 32789	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edith K. Murphy*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/10/03 407-679-6171

CR2034 (1/0/02)