

FILED
Apr 30, 2007 8:00 am
Secretary of State

400051 -

DOCUMENT # P06000047072

1. Entity Name

MULTINATIONAL REALTY CORP.

Principal Place of Business

4509 NW 23RD AVE.
SUITE C
GAINESVILLE, FL 32606 US

Mailing Address

4509 NW 23RD AVE.
SUITE C
GAINESVILLE, FL 32606 US

2. Principal Place of Business - No P.O. Box #

4509 NW 23RD AVE. SUITE 3

Suite, Apt. #, etc.
GAINESVILLE, FL

City & State

3. Mailing Address

4509 NW 23RD AVE. SUITE 3

Suite, Apt. #, etc.
GAINESVILLE, FL

City & State

Zip

32606

Country

USA

4. FEI Number

50-0023344

Applied For

Not Applicable

5. Certificate of Status Desired

CR2E034 (12/06)

8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCGLYNN, RHODA G
4509 NW 23RD AVE.
SUITE C
GAINESVILLE, FL 32606

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

RHODA GRACIELA MCGLYNN, Pres.

4/27/09

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

P

NAME

TALADUA, RHODA

STREET ADDRESS

2427 NW 147TH STREET

CITY-ST-ZIP

NEWBERRY, FL 32669

Delete

TITLE

VP

NAME

MCGLYNN, JAMES A

STREET ADDRESS

2427 NW 147TH STREET

CITY-ST-ZIP

NEWBERRY, FL 32669

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

Pres.

NAME

MCGLYNN, RHODA G

STREET ADDRESS

14112 NW 30TH AVE.

CITY-ST-ZIP

GAINESVILLE, FL 32606

Change Addition

last name address

TITLE

VP

NAME

MCGLYNN, JAMES A

STREET ADDRESS

14112 NW 30TH AVE.

CITY-ST-ZIP

GAINESVILLE, FL 32606

Change Addition

address

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

RHODA GRACIELA MCGLYNN Pres.

4/27/07 352-509322

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #