

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90023 036 ***550.00

DOCUMENT # P94000038946

1. Entity Name
MORRIS REALTY GROUP, INC.

Principal Place of Business

120 E. PALMETTO PK RD
 STE 425
 BOCA RATON FL 33432
 US

Mailing Address

1046 MELALEUCA ROAD
 DELRAY BEACH FL 33483

**99 SE Mizner Blvd.
 Boca Raton, FL 33432**

2. Principal Place of Business

99 SE Mizner Blvd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DELRAY BEACH, Florida

City & State

4. FEI Number **65-0510733**

Applied For

Not Applicable

Zip

Country

33432 USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MORRIS, ELAINE H
 1046 MELALEUCA ROAD
 DELRAY BEACH FL 33483**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 13, 2002 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SD**
 NAME **MORRIS, SCOTT W**
 STREET ADDRESS **120 E. PALMETTO PK RD STE. 425**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **SD**
 NAME **MORRIS, SCOTT W** ☒ Change ☐ Addition
 STREET ADDRESS **602 NW 4TH AVENUE**
 CITY-ST-ZIP **DeLray Beach, Florida 33444**

TITLE **TD**
 NAME **HARTMAN, TERI A**
 STREET ADDRESS **272 BRIGHTON RD**
 CITY-ST-ZIP **ATLANTA GA**

TITLE **TD**
 NAME **HARTMAN, TERI A**
 STREET ADDRESS **272 BRIGHTON RD**
 CITY-ST-ZIP **ATLANTA GA**

TITLE **VD**
 NAME **MORRIS, MATTHEW C**
 STREET ADDRESS **121 12TH STREET**
 CITY-ST-ZIP **MANHATTAN BEACH CA 90266**

TITLE **VD**
 NAME **MORRIS, MATTHEW C**
 STREET ADDRESS **121 12TH STREET**
 CITY-ST-ZIP **MANHATTAN BEACH CA 90266**

TITLE **PD**
 NAME **MORRIS, ELAINE H**
 STREET ADDRESS **1046 MELALEUCA RD**
 CITY-ST-ZIP **DELRAY BEACH FL**

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 CITY-ST-ZIP **DELRAY BEACH FL**

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elaine H. Morris
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/02

**561-367-0033
 561-368-9820**

CR2E034 (4/02)