

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2003 8:00 am
Secretary of State

08-14-2003 90067 030 ***550.00

DOCUMENT # P94000038946

1. Entity Name
MORRIS REALTY GROUP, INC.



Principal Place of Business
**99 SE MIZNER BLVD
DELRAY BEACH FL 33432
US**

Mailing Address
**1046 MELALEUCA ROAD
DELRAY BEACH FL 33483**



2. Principal Place of Business

3. Mailing Address

99 SE MIZNER BLVD Suite 120

SAME (Suite 120) 99 SE MIZNER BLVD Suite 120

Boca Raton FL

Florida

4. FEI Number **65-0510733**

Applied For
Not Applicable

Zip **33482** Country **Palm Beach**

Zip **33432** Country **Palm Beach**

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 **SAME**
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 **Elaine H. Morris** **Elaine H. Morris** **8/11/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SD** ☐ Delete
NAME **MORRIS, SCOTT W**
STREET ADDRESS **602 NW 4TH AVENUE**
CITY-ST-ZIP **DELRAY BEACH FL 33444**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

August 11, 2003 **561-367-0033**
Date Daytime Phone #

CR2E034 (4/03)