

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90087 049 ***150.00

DOCUMENT # S54965

1. Entity Name
MGI REALTY, INC.



Principal Place of Business
**2479 ALOMA AVENUE
WINTER PARK FL 32792
US**

Mailing Address
**2479 ALOMA AVENUE
WINTER PARK FL 32792
US**

90019498



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3070567**

Applied For

Not Applicable

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

**PETTERSON, RICHARD A.
1167 LAKEVIEW DR
WINTER PARK FL 32789**

Name

PETTERSON, RICHARD A.

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

1042 S. KENTUCKY AVE

City

WINTER PARK

FL

Zip Code

32789

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

Richard A. Peterson

2/5/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
PETTERSON, RICHARD A
1167 LAKEVIEW DR
WINTER PARK FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPT
1042 S. KENTUCKY AVE
WINTER PARK, FL 32789-4750** ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
HIRSCHMANN, KRISTINE P
1140 KEWANEE TR
MAITLAND FL 32751** ☐ Delete

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

TITLE
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STREET ADDRESS
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CITY-ST-ZIP
☐ Change ☐ 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:

Richard A. Peterson **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/03

Date

407 644-7922

Daytime Phone #

CR2E034 (10/02)