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**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



**FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS**

**DOCUMENT # F00184 (4)**

**1. Corporation Name  
MURDOCK, INC.**

**Principal Place of Business Mailing Address  
223 PERUVIAN AVENUE 223 PERUVIAN AVENUE  
P O BOX 966 P O BOX 966  
PALM BEACH FL 33480 PALM BEACH FL 33480**

DO NOT WRITE IN THIS SPACE.

**3. Date Incorporated or Qualified 10/02/1980 3a. Date of Last Report 02/10/1994**  
**4. FEI Number 65-0120253 Applied For Not Applicable**  
**5. Certificate of Status Desired \$8.75 Additional Fee Required**  
**6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees**  
**8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No**

**2. Principal Place of Business 2a. Mailing Address**  
**21 26**  
**22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.**  
**23 City & State 28 City & State**  
**24 Zip 25 Country 29 Zip 30 Country**

**9. Name and Address of Current Registered Agent**  
**BROBERG, GUSTAVE T  
256 WORTH AVENUE  
PALM BEACH FL 33480**

**10. Name and Address of New Registered Agent**  
**81 Name**  
**82 Street Address (P.O. Box Number is Not Acceptable)**  
**83**  
**84 City FL 85 Zip Code**

**11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of Section 607.0505, Florida Statutes.**

**SIGNATURE** *[Signature]* **DATE** **3/11/95**

**12. OFFICERS AND DIRECTORS**

<b>TITLE</b>	<b>PD</b>
<b>NAME</b>	<b>BROBERG, GUSTAVE T., JR</b>
<b>STREET ADDRESS</b>	<b>223 PERUVIAN AVENUE</b>
<b>CITY - ST - ZIP</b>	<b>PALM BEACH FL</b>
<b>TITLE</b>	<b>SD</b>
<b>NAME</b>	<b>VILLARS, NANCY L</b>
<b>STREET ADDRESS</b>	<b>223 PERUVIAN AVENUE</b>
<b>CITY - ST - ZIP</b>	<b>PALM BEACH FL</b>
<b>TITLE</b>	<b>TD</b>
<b>NAME</b>	<b>HALL, BETTY JEAN</b>
<b>STREET ADDRESS</b>	<b>223 PERUVIAN AVENUE</b>
<b>CITY - ST - ZIP</b>	<b>PALM BEACH FL</b>
<b>TITLE</b>	<b>VP</b>
<b>NAME</b>	<b>MURDOCK, LINTON F</b>
<b>STREET ADDRESS</b>	<b>223 PERUVIAN AVENUE</b>
<b>CITY - ST - ZIP</b>	<b>PALM BEACH FL</b>
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>1.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>1.2 NAME</b>	
<b>1.3 STREET ADDRESS</b>	
<b>1.4 CITY - ST - ZIP</b>	
<b>2.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>2.2 NAME</b>	
<b>2.3 STREET ADDRESS</b>	
<b>2.4 CITY - ST - ZIP</b>	
<b>3.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>3.2 NAME</b>	
<b>3.3 STREET ADDRESS</b>	
<b>3.4 CITY - ST - ZIP</b>	
<b>4.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>4.2 NAME</b>	
<b>4.3 STREET ADDRESS</b>	
<b>4.4 CITY - ST - ZIP</b>	
<b>5.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>5.2 NAME</b>	
<b>5.3 STREET ADDRESS</b>	
<b>5.4 CITY - ST - ZIP</b>	
<b>6.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>6.2 NAME</b>	
<b>6.3 STREET ADDRESS</b>	
<b>6.4 CITY - ST - ZIP</b>	

**14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I, as 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 Book 13 or Book 13 if changed, or on an attachment with an address.**

**SIGNATURE:** *[Signature]* **DATE:** **2/24/95** **(407) 655-3166**