

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025146

FILED
Apr 23, 2008
Secretary of State

Entity Name: THE MURPHSTON GROUP, LLC

Current Principal Place of Business:

ONE N CLEMATIS ST, STE 305
WEST PALM BEACH, FL 33401

New Principal Place of Business:

4650 DONALD ROSS ROAD
SUITE 200
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

ONE N CLEMATIS ST, STE 305
WEST PALM BEACH, FL 33401

New Mailing Address:

4650 DONALD ROSS ROAD
SUITE 200
PALM BEACH GARDENS, FL 33418

FEI Number: 20-0958174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESTON, JOHN
ONE N CLEMATIS ST, STE 305
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

PRESTON, JOHN W.S.
4650 DONALD ROSS ROAD
SUITE 200
PALM BEACH GARDENS, FL 33418 US

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.

SIGNATURE: JOHN W.S. PRESTON

04/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PRESTON, STEPHEN S.B.
Address: 6210 CAMPBELL RD, STE 140
City-St-Zip: DALLAS, TX 75248

Title: MGR () Delete
Name: MURPHY, BRETT W
Address: 316 1ST AVE
City-St-Zip: ORTLEY BEACH, NJ 08751

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN W.S. PRESTON

RA

04/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date