


2005 FOR PROFIT CORPORATION ANNUAL REPORT

4/ **FILED**
Apr 20, 2005 8:00 am
Secretary of State

04-08-2005 90059 009 ***150.00

DOCUMENT # P04000019837

1. Entity Name
F.L. MURRAY MASONRY, INC.



Principal Place of Business
6274 NW 61ST LANE
OCALA, FL 34482 US

Mailing Address
6274 NW 61ST LANE
OCALA, FL 34482 US

2. Principal Place of Business
6274 NW 61st Lane

3. Mailing Address
6274 NW 61st Lane

Suite, Apt. #, etc.
Home

City & State
Ocala Fla

City & State
Ocala Fla

Zip
34482

Country
Marion

Zip
34482

Country
Marion

03232005 Chg-P CR2E034 (10/03)

4. FEI Number
26-0079241

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MURRAY, FREDRICK L
6274 NW 61ST LANE
OCALA, FL 34482

7. Name and Address of New Registered Agent

Name **FREDRICK MURRAY**

Street Address (P.O. Box Number is Not Acceptable)
6274 NW 61st Lane

City **Ocala** FL Zip Code **34482**

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: *Fredrick Murray* (NOTE: Registered Agent signature required when reinstating)

DATE: 4-7-05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	MURRAY, FREDRICK L	
STREET ADDRESS	6274 NW 61ST LANE	
CITY - ST - ZIP	OCALA, FL 34482	
TITLE	F.L. MURRAY MASONRY, INC.	<input type="checkbox"/> Delete
NAME	6274 NW 61ST LANE	
STREET ADDRESS	6274 NW 61ST LANE	
CITY - ST - ZIP	Ocala Fla 34482	
TITLE	FREDRICK L. MURRAY	<input type="checkbox"/> Delete
NAME	6274 NW 61st Lane	
STREET ADDRESS	6274 NW 61st Lane	
CITY - ST - ZIP	Ocala FL 34482	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	None	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	None	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Fredrick L. Murray* **4-7-05 / 362-1540**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #