FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V54350 (6)

1. Corporation Name
MURPHY CO. INC.

Principal Place of Business
3610 WEST HILLSBORO BLVD.
DEERFIELD BEACH FL 33442

Mailing Address
3610 WEST HILLSBORO BLVD
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/31/1992
3a. Date of Last Report: 04/19/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)

4. FEI Number: 65-0349769 — Applied For / Not Applicable

Suite/Apt. # (22) — Suite/Apt. # (27)

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State (23) — City & State (28)

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip (24) County (25) — Zip (29) County (30)

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
DAIL, ELLEN MURPHY
3610 WEST HILLSBORO BLVD.
DEERFIELD BEACH FL 33442

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 607.0505, and 607.0506, 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. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and hereby agree to comply with the provisions of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995
TITLE D NAME DAIL, ELLEN MURPHY STREET ADDRESS 4222 N.W. 66TH DRIVE CITY, ST, ZIP COCONUT CREEK FL	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE D NAME VON RABENSTEIN, CAROL STREET ADDRESS 21710 LITTLE BEAR LANE CITY, ST, ZIP BOCA RATON FL	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE P ☐ Change ☒ Addition NAME DAIL BRIAN STREET ADDRESS 4222 NW 66TH DRIVE CITY, ST, ZIP COCONUT CREEK FL.
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Further I 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 am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 hereof or I am a duly elected or appointed officer with an address.

SIGNATURE: Ellen D — SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-95 — DATE

0296220 CP