

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



SECRETARY OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

AND
FILED

95 FEB 27 AM 12:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **344557** (4)

1. Corporation Name

MURPHY OLDSMOBILE-TOYOTA-GMC TRUCK INC.

Principal Place of Business

**174 EAST HIBISCUS BLVD
MELBOURNE FL 32901**

Mailing Address

**174 EAST HIBISCUS BLVD
MELBOURNE FL 32901**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1969

3a. Date of Last Report

01/25/1994

4. FEI Number

59-1262310

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

21

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MURPHY, EUGENE T
2280 S. FRONT ST. #308
MELBOURNE FL 32901**

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PD
MURPHY, EUGENE T
174 E HIBISCUS BLVD
MELBOURNE FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VD
MURPHY, THOMAS H
174 E HIBISCUS BLVD
MELBOURNE FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**SD
MURPHY, JEAN G
174 E HIBISCUS BLVD
MELBOURNE FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. 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 119.076(9)(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 am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

2-20-95

(407) 727-2830