

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 464262

1. Entity Name  
WILLIAM J. MURRAY, D.D.S. PROFESSIONAL  
ASSOCIATION



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 FEB 22 PM 12:00

Principal Place of Business  
3409 S. MANHATTAN AVE.  
TAMPA, FL 33629

Mailing Address  
3409 S. MANHATTAN AVE.  
TAMPA, FL 33629



02052008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1558823

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

MURRAY, WILLIAM J.  
3409 S MANHATTAN AVENUE  
TAMPA, FL 33629

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
MURRAY, WILLIAM J.  
3409 S. MANHATTAN AVE  
TAMPA, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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CITY - ST - ZIP

PS 2/22/08

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03/06/08--01012--023 \*\*577.50

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *William J. Murray*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

102/13/08

Date

8138559001

Daytime Phone #