


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 604948 (0)					
1. Corporation Name TIM K. MURRAY, D.V.M., P.A.					
Principal Place of Business 3201 CRILL AVE. PALATKA FL 32177-4158			Mailing Address 3201 CRILL AVE. PALATKA FL 32177-4158		
2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 01/14/1974	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 59-1500543	
City & State 23		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24		Country 25		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 24		Country 25		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
g. Name and Address of Current Registered Agent MURRAY, TIM K. 3201 CRILL AVENUE PALATKA FL 32177			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
1.2 NAME Ronald P. Johnson					
1.3 STREET ADDRESS 3201 Crill Avenue					
1.4 CITY-ST-ZIP Palatka, FL 32177					
2.1 TITLE Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
2.2 NAME Virginia P. Murray					
2.3 STREET ADDRESS 3201 Crill Avenue					
2.4 CITY-ST-ZIP Palatka, FL 32177					
3.1 TITLE Officer - Vice President - Treas <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
3.2 NAME Kelly M. Johnson					
3.3 STREET ADDRESS 3201 Crill Avenue					
3.4 CITY-ST-ZIP Palatka, FL 32177					
4.1 TITLE 1st. Vice President -Sec. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
4.2 NAME Jennifer Marraffino					
4.3 STREET ADDRESS 3201 Crill Ave.					
4.4 CITY-ST-ZIP Palatka, FL 32177					
5.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					

SIGNATURE:

NATURE REQUIRED

904-328-9616

CR2E034 (10/97)