## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F13656

1. Entity Name

GEORGE F. MURPHY, ATTORNEY AT LAW, P.A.



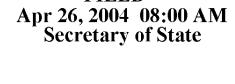
Principal Place of Business

Mailing Address

1173 BAYSHORE DRIVE VALPARAISO, FL 32580

DO NOT WRITE IN THIS SPACE

P 0 B0X 188 VALPARAISO, FL 32580 US



**FILED** 



04242004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2053785

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

850-678-7802

6. Name and Address of Current Registered Agent

MURPHY, GEORGE F 1173 BAYSHORE DRIVE VALPARAISO, FL 32580

SIGNATURE:

## 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 famillar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered apent and idle if applicable. (NOTE, Registered Agent (Gratum required when reinstating)  DATE					
Signature, typed or printed name of registered agent and title if applicable. (FICTE: Registered Agent					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Cam Trust Fund Co			cing _	\$5.00 May Be Added to Fees	•
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · ·	X-9
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP MURPHY, GEORGE F 1173 BAYSHORE DRIVE VALPARAISO, FL 00000,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					009080132462 04/27/04-80048-888 150.08
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY+ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-S1-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certily that the information supplied with this filling does not quality for the examption 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 bustee 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.					

G OFFICER ON DIRECTOR