2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F28695

1. Entity Name
MURRY'S TIRE, INC.

Principal Place of Business	Mailing Address
615 MAIN ST	615 MAIN ST
CHIPLEY, FL 32428 US	CHIPLEY, FL 32428 US

DO NOT WRITE IN THIS SPACE

01132005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-2082370	Not Applicable

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

6. Name and Address of Current Registered Agent

HOLLEY, GERALD
102 E CHURCH ST
CHIPLEY, FL 32428

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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, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GILLEY, MURRY L
STREET ADDRESS	2450 MITCHELL RD
CITY-ST-ZIP	HARTFORD, AL 36344
TITLE	D
NAME	GILLEY, BARBARA G
STREET ADDRESS	100 TWIN LAKES DR
CITY-ST-ZIP	DOTHAN, AL 363053100
TITLE	DP
NAME	GILLEY, JAMES M
STREET ADDRESS	100 TWIN LAKES DR
CITY-ST-ZIP	DOTHAN, AL 363053100
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/19/05-80067-011 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption 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 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: _Murry Gilley_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #