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

**PROFIT** CORPORATION ANNUAL REPORT 1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Jan 28 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F69746

(8)

JOHN V. MURPHY CONSTRUCTION, INCORPORATED Principal Place of Business Mailing Address 401 S. KATHERINE AVENUE 401 S. KATHERINE AVENUE PANAMA CITY FL 32404 PANAMA CITY FL 32404 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/05/1982 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-2163203 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 25 Personal Property Tax due June 30. 24 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 MURPHY, JOHN V. 401 S. KATHERINE AVE Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32404 83 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition MURPHY, GAYLE NAME 1.2 NAME 401 S KATHERINE AVE STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY, FL 00000 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE MURPHY, JOHN V STREET ADDRESS 401 S KATHERINE AVE 2.3 STREET ADDRESS PANAMA CITY, FL 00000 CITY-ST-ZIP 2 4 CiTY - ST - 7/P TITLE ☐ DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - 7IP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. Drule C. Yourson Gayle C. Murphy 1/21/98 850-871-0539

6.4 CITY - ST- ZIP