

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004737

FILED
Jan 07, 2004
Secretary of State

Entity Name: BARRY MURPHY & COMPANY, INC.

Current Principal Place of Business:

77 SUMMER STREET
BOSTON, MA 02110 US

New Principal Place of Business:

Current Mailing Address:

77 SUMMER STREET
BOSTON, MA 02110

New Mailing Address:

FEI Number: 04-2556022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, BARRY
500 NORTHWEST SHARE BLVD
SUITE 820
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCDS () Delete
Name: MURPHY, BARRY W
Address: 84 OLD COLONY ROAD
City-St-Zip: WELLESLEY HILLS, MA

Title: T () Delete
Name: MURPHY, BARRY W
Address: 84 OLD COLONY ROAD
City-St-Zip: WELLESLEY HILLS, MA

Title: V () Delete
Name: MURPHY, PAULA G
Address: 84 OLD COLONY ROAD
City-St-Zip: WELLESLEY HILLS, MA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCDS (X) Change () Addition
Name: MURPHY, BARRY W
Address: 1 AVERY STREET
City-St-Zip: BOSTON, MA 02111

Title: T (X) Change () Addition
Name: MURPHY, BARRY W
Address: 1 AVERY STREET
City-St-Zip: BOSTON, MA 02111

Title: V (X) Change () Addition
Name: MURPHY, PAULA G
Address: 1 AVERY STREET
City-St-Zip: BOSTON, MA 02111

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY MURPHY

CHRM

01/07/2004

Electronic Signature of Signing Officer or Director

Date