

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002005

1. Entity Name

MURRAY (UK) PLC, INC.

**FILED**  
**May 18, 2001 8:00 am**  
**Secretary of State**

05-18-2001 91222 002 \*\*\*150.00

0545529

551499



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1858 RINGLING BLVD  
SARASOTA FL 34236  
US

Mailing Address

1858 RINGLING BLVD  
SARASOTA FL 34236  
US

2. Principal Place of Business

MURRAY HOMES INC

3. Mailing Address

AT BESIDE

Suite, Apt. #, etc.

3424 PINE VALLEY DR

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

Zip

34239

Country

USA

Country

4. FEI Number

98-0160268

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GLENDINNING, RENE M  
1858 RINGLING BLVD  
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name

STEVE MURRAY

Street Address (P.O. Box Number is Not Acceptable)

3424 PINE VALLEY DR

City

SARASOTA

FL

Zip Code

34239

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/01

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MURRAY, JOHN P.S. #4 SAXON PLACE LYMINGTON, HAMPSHIRE UK S041- 9E2	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC MURRAY, STEPHEN J #4 SAXON PLACE LYMINGTON, HAMPSHIRE UK S041- 9E2	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURRAY, GLYNIS #4 SAXON PLACE LYMINGTON, HAMPSHIRE UK S041- 9E2	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MURRAY, JOHN PS RAMBLER COTTAGE BURLEY BH944EA UK	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC MURRAY, STEPHEN J RAMBLER COTTAGE BURLEY BH944EA UK	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURRAY, GLYNIS RAMBLER COTTAGE BURLEY BH944EA UK	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01

Date

941-350-7777

Daytime Phone #

CR2E034 (10/00)