

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

APPROVED
AND
FILED

94 JUL 11 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J27078 (1)

1. Corporation Name

MURRAY SURVEYING, INC.

Mailing Address
14902-B N FLORIDA AVE
TAMPA FL 33613

Principal Place of Business
14902-B N FLORIDA AVE
TAMPA FL 33613

If above addresses are incorrect in any way line through incorrect information and enter correction below

DO NOT WRITE IN THIS SPACE

2. Mailing Address		2a. Principal Place of Business	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
08/04/1986	04/13/1993
4. FEI Number	Applied For
59-2697260	Not Applicable
5. Certificate of Status Desired	6. Election Campaign Financing Trust Fund Contribution
\$8.75 Additional Fee Required ☐	☐
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RODRIGUEZ, CHARLES, JR.
14902-B N FLA AVE
TAMPA FL 33613

81 Name	Barbara Murray
82 Street Address (P.O. Box Number is Not Acceptable)	14902-B N. Florida Avenue
83	
84 City	Tampa
85 FL	Zip Code 33613

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 my appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE

Barbara A. Murray

Signature, typed or printed name of registered agent and block of application

6/23/94

12. OFFICERS AND DIRECTORS				13. CHANGES TO OFFICERS AND DIRECTORS IN 12			
11 TITLE	3/10	11 TITLE		11 TITLE		11 TITLE	
12 NAME	RODRIGUEZ, CHARLES F., JR.	12 NAME		12 NAME		12 NAME	
13 STREET ADDRESS	14902-B N FLA AVE	13 STREET ADDRESS		13 STREET ADDRESS		13 STREET ADDRESS	
14 CITY- ST- ZIP	TAMPA FL--	14 CITY- ST- ZIP		14 CITY- ST- ZIP		14 CITY- ST- ZIP	
21 TITLE	P/D	21 TITLE		21 TITLE		21 TITLE	
22 NAME	MURRAY, LARRY A---	22 NAME		22 NAME		22 NAME	
23 STREET ADDRESS	14902-B N FLA AVE	23 STREET ADDRESS		23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY- ST- ZIP	TAMPA FL-----	24 CITY- ST- ZIP		24 CITY- ST- ZIP		24 CITY- ST- ZIP	
31 TITLE		31 TITLE		31 TITLE		31 TITLE	
32 NAME		32 NAME		32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS		33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY- ST- ZIP		34 CITY- ST- ZIP		34 CITY- ST- ZIP		34 CITY- ST- ZIP	
41 TITLE		41 TITLE		41 TITLE		41 TITLE	
42 NAME		42 NAME		42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS		43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY- ST- ZIP		44 CITY- ST- ZIP		44 CITY- ST- ZIP		44 CITY- ST- ZIP	
51 TITLE		51 TITLE		51 TITLE		51 TITLE	
52 NAME		52 NAME		52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS		53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY- ST- ZIP		54 CITY- ST- ZIP		54 CITY- ST- ZIP		54 CITY- ST- ZIP	
61 TITLE		61 TITLE		61 TITLE		61 TITLE	
62 NAME		62 NAME		62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS		63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY- ST- ZIP		64 CITY- ST- ZIP		64 CITY- ST- ZIP		64 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(2)(b), 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Barbara A. Murray

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/94

(83) 980-4080

2

13. New Directors:

Barbara Murray - P/T/S/D
14902-B N. Florida Avenue
Tampa, Florida 33613