

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J99187

FILED
Jan 30, 2008
Secretary of State

Entity Name: CHARLES S. MURPHY FERNERY, INC.

Current Principal Place of Business:

3 PELICAN LANE
EDGEWATER, FL 32141

New Principal Place of Business:

Current Mailing Address:

3 PELICAN LANE
EDGEWATER, FL 32141

New Mailing Address:

FEI Number: 59-2873378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, CHARLES S.
3 PELICAN LANE
EDGEWATER, FL 32141 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: PTSD () Delete
Name: MURPHY, CHARLES S.,
Address: 3 PELICAN LANE
City-St-Zip: EDGEWATER, FL 33141

Title: VP () Delete
Name: MOORE, PATRICIA L
Address: PO BOX 753
City-St-Zip: DELEON SPRINGS, FL 32150

Title: D () Delete
Name: ALLISON, SANDRA L
Address: 1715 TWIN OAKS DR
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: MURPHY, CHARLES O
Address: 5467 CORMOODY LAKE DR
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: MURPHY, CHARLES S.,
Address: 3 PELICAN LANE
City-St-Zip: EDGEWATER, FL 32141

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MURPHY, CHARLES O
Address: 19104 LIME STONE COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES S. MURPHY

PTSD

01/30/2008

Electronic Signature of Signing Officer or Director

Date