

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092276

Entity Name: MURPHY BAY, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

11555 CENTRAL PARKWAY, #1102
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

11555 CENTRAL PARKWAY, #1102
JACKSONVILLE, FL 32224

New Mailing Address:

PO BOX 56644
JACKSONVILLE, FL 32241

FEI Number: 20-2031742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTERSON, BOND & LATSHAW, P.A.
3010 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

LAW OFFICES OF C. GUY BOND, PA
11512 LAKE MEAD AVE.
SUITE 303
JACKSONVILLE, FL 32256 US

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: C. GUY BOND

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MURPHY, CLINT
Address: 11555 CENTRAL PARKWAY, #1102
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: DUDLEY, JOHNNY
Address: 11555 CENTRAL PARKWAY, #1102
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: DUDLEY, JOHNNY
Address: 11512 LAKE MEAD AVE., #303
City-St-Zip: JACKSONVILLE, FL 32256

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHNNY L. DUDLEY

MGRM

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date