2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117737

Entity Name: MURPHY INSURANCE SERVICES LLC

FILED Aug 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3751 EAGLE HAMMOCK DR. 3521 CHERRY BLOSSOM CT #102

SARASOTA, FL 34240 US ESTERO, FL 33928 US

Current Mailing Address: New Mailing Address:

3751 EAGLE HAMMOCK DR. 3521 CHERRY BLOSSOM CT #102

SARASOTA, FL 34240 ESTERO, FL 33928

FEI Number: 13-4363716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MURPHY, CAROL A MURPHY, CAROL A 3751 EAGLE HAMMOCK DR 3521 CHÉRRY BLOSSOM CT #102

SARASOTA, FL 34240 ESTERO, FL 33928

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: 08/24/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR () Delete Title: (X) Change () Addition

MURPHY, STEVE F MURPHY, STEVE F Name: Name: Address: 3751 EAGLE HAMMOCK DR Address: 3521 CHERRY BLOSSOM CT, #102

City-St-Zip: SARASOTA, FL 34240 US City-St-Zip: ESTERO, FL 33928 US

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: CAROL ADAM MURPHY 08/24/2007