

2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90219 045 ***150.00

DOCUMENT # M91742

1. Entity Name

MURPHY REALTY & INVESTMENTS, INC.

00014401

Principal Place of Business

4964 HWY 90 SUITE A
 PACE FL 32571
 US

Mailing Address

4964 HWY 90 SUITE A
 PACE FL 32571
 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Bass and Sandfort Accountants PA
1301 West Garden Street
Pensacola, FL 32501

DO NOT WRITE IN THIS SPACE

City & State

Number 59-2902615

Applied For
 Not Applicable

Zip

Country

4. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BASS & SANDFORT ACCOUNTANTS INC.
127 E. ZARAGOZA ST.
#206
PENSACOLA FL 32501

Bass and Sandfort Accountants PA
1301 West Garden Street
Pensacola, FL 32501

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

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MURPHY, BOBBY R		NAME		
STREET ADDRESS	3900 BELLOMY STREET		STREET ADDRESS		
CITY-ST-ZIP	PACE FL 32571		CITY-ST-ZIP		
TITLE	DPST	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MURPHY, ROBERT		NAME		
STREET ADDRESS	4936 HWY 90		STREET ADDRESS		
CITY-ST-ZIP	PACE FL 32571		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 or other like empowered.

CR2E034 (9/01)