

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009116

FILED  
Apr 24, 2009  
Secretary of State

**Entity Name:** THE JERRY F. MURDOCK FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

441 CAPTAINS CIR.  
DESTIN, FL 32541

**New Principal Place of Business:**

441 CAPTAINS CIRCLE  
DESTIN, FL 32541 US

**Current Mailing Address:**

441 CAPTAINS CIR.  
DESTIN, FL 32541

**New Mailing Address:**

441 CAPTAINS CIRCLE  
DESTIN, FL 32541 US

**FEI Number:** 57-1139312

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HELMICH, KEVIN M ESQ.  
4481 LEGENDARY DRIVE  
SUITE 200  
DESTIN, FL 32541 US

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

HELMICH, KEVIN M ESQUIRE  
4481 LEGENDARY DRIVE  
SUITE 200  
DESTIN, FL 32541 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: KEVIN M. HELMICH

04/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MURDOCK, JERRY F SR.  
Address: 441 CAPTAINS CIR  
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete  
Name: MURDOCK, GAYLE  
Address: 441 CAPTAINS CIR.  
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete  
Name: MURDOCK, EDWARD L  
Address: 435 SOUTH FAIRVIEW  
City-St-Zip: LAVONIA, GA 30553

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MURDOCK, JERRY F SR.  
Address: 441 CAPTAINS CIRCLE  
City-St-Zip: DESTIN, FL 32541 US

Title: VPST (X) Change ( ) Addition  
Name: MURDOCK, GAYLE  
Address: 441 CAPTAINS CIRCLE  
City-St-Zip: DESTIN, FL 32541 US

Title: D (X) Change ( ) Addition  
Name: MURDOCK, EDWARD L  
Address: 435 SOUTH FAIRVIEW  
City-St-Zip: LAVONIA, GA 30553 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY F. MURDOCK

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date