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FILED

Jan 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18462 (4)

1. Corporation Name

THE MURRAY FOUNDATION, INC.

Principal Place of Business

Mailing Address

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET SUITE 105
TALLAHASSEE FL 32301-2636
USP.O. BOX 8714 9/802
WILMINGTON DE 19899-8714
US3. Date Incorporated or Qualified
12/29/19863a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 c/o JP MORGAN SERVICES, INC.

4. FEI Number

13-3421590

Applied For

Not Applicable

22 City & State

27 Suite, Apt. #, etc.

P.O. Box 8714 9/802

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

23 Zip

28 City & State

WILMINGTON, DE

6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees

24 Country

25

29 Zip

19899-8714

30 Country

US

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME HOSEA, ELIZABETH
STREET ADDRESS 50 BALDWIN LANE
CITY-ST-ZIP PRINCETON NJ1.1 TITLE Dir ☐ Change ☒ Addition
1.2 NAME Murray, Robert S.
1.3 STREET ADDRESS RR 4 Box 1349
1.4 CITY-ST-ZIP Plymouth, NHTITLE CD ☐ DELETE
NAME MURRAY, JOHN P
STREET ADDRESS 202 S BEACH RD
CITY-ST-ZIP HOBE SOUND FL2.1 TITLE Dir/Treas ☐ Change ☒ Addition
2.2 NAME Murray, Matthew T
2.3 STREET ADDRESS 4230 S.E. Rubin Ave
2.4 CITY-ST-ZIP Stuart, FLTITLE VDS ☐ DELETE
NAME MURRAY, JAMES M
STREET ADDRESS 280 RIDGEVIEW RD
CITY-ST-ZIP PRINCETON NJ3.1 TITLE VP/MAKED/SECY ☒ Change ☐ Addition
3.2 NAME Murray, James M
3.3 STREET ADDRESS 280 Ridgeview Rd
3.4 CITY-ST-ZIP Princeton, NJTITLE VPTD ☐ DELETE
NAME MURRAY, JOHN P III
STREET ADDRESS 420 E 80TH STREET #12G
CITY-ST-ZIP NEW YORK NY4.1 TITLE Pres/Dir ☒ Change ☐ Addition
4.2 NAME Murray, John P III
4.3 STREET ADDRESS 420 E 80th Street #12G
4.4 CITY-ST-ZIP New York, NYTITLE D ☐ DELETE
NAME KELSEY, ELLEN
STREET ADDRESS 10 SPRING HOUSE RD
CITY-ST-ZIP GREENWICH CT5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MURRAY, MARY T.
STREET ADDRESS 202 S. BEACH RD.
CITY-ST-ZIP HOBE SOUND FL6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR J. Michael Murray Date 1/24/97

Daytime Phone # 0078232

CP2E037 (9/96)