## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 13, 2006 8:00 am Secretary of State DOCUMENT # N18462 1. Entity Name 04-13-2006 90288 038 \*\*\*\*61.25 THE MURRAY FOUNDATION, INC. Principal Place of Business Mailing Address 20 W MAIN ST 20 W MAIN ST BEACON NY 12508 BEACON NY 12508 3. Mailing Address 2. Principal Place of Business 60 Gramero Park North 60 Granercy Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) 8 9 8 G Applied For City & State City & State 4. FEI Number 13-3421590 New\_ New York Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 10010 10010 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City Zip Code 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature typed or printed name of registered agent and little if applicable (NOTE: Registored Agent signature required when reinstaing) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Delete TITLE ☐ Change Addition TITLE HOSEA, ELIZABETH NAME NAME WINDY HILL FARM, 711 CHERRY VALLEY RD STREET ADDRESS STREET ADDRESS PRINCETON NJ CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition MURRAY, M. TIMOTHY NAME NAME PO BOX 2382 STREET ADDRESS STREET ADDRESS HOBE SOUND FL 33475 CITY-S1-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition TITLE NAME MURRAY, ROBERT S NAME STREET ADDRESS 20 W MAIN ST STREET ADDRESS BEACON NY 12508 CITY-ST-7IP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME MURRAY, JOHN P III STREET ADDRESS 60 GRAMERCY PARK NORTH 8G STREET ADDRESS NEW YORK NY 10010 CITY-SI-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ■ Addition KELSEY, ELLEN NAME MAME 24 OAKLEY LANE STREET ADDRESS STREET ADDRESS CT 06831 **GREENWICH CT** Greenwich CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition THILE ☐ Delete TITLE MURRAY, MARY T NAME NAME 202 S. BEACH RD. STREET ADDRESS STREET ADDRESS HOBE SOUND FL CITY-ST-ZIP CITY-ST-ZiP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

P. Murray III

FILED