

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023930

Entity Name: MURRAY MARSH, INC.

FILED  
Jul 27, 2006  
Secretary of State

**Current Principal Place of Business:**

4739 N. RIVER RD.  
ALVA, FL 33920

**New Principal Place of Business:**

**Current Mailing Address:**

4739 N. RIVER RD.  
ALVA, FL 33920

**New Mailing Address:**

FEI Number: 65-1030572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MINER, BOBBIE S  
MINER & COMPANY INC  
1207 SW 19TH LANE  
CAPE CORAL, FL 33991 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MURRAY, GERALD W  
Address: 4739 N. RIVEA RD  
City-St-Zip: ALVA, FL 33920

Title: SD ( ) Delete  
Name: MARSH, LARRY  
Address: 12400 MICCOUSUKEE TRAIL  
City-St-Zip: LABELLE, FL 33935

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD W. MURRAY

PRES

07/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date