

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023930

Entity Name: MURRAY MARSH, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

4739 COUNTY RD 78 W
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

4739 COUNTY RD 78 W
LABELLE, FL 33935

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURRAY, GERALD W
Address: 4739 COUNTY RD 78 W
City-St-Zip: LABELLE, FL 33935

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 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: LARRY MARSH

PRES

05/01/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date