

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000072759

FILED
Apr 26, 2003
Secretary of State

Entity Name: MURPHY MORTGAGES, INC.

Current Principal Place of Business:

600 S. PARROTT AVE
OKEECHOBEE, FL 34974

New Principal Place of Business:

Current Mailing Address:

600 S. PARROTT AVE
OKEECHOBEE, FL 34974

New Mailing Address:

6 CASEY LANE
OKEECHOBEE, FL 34974

FEI Number: 59-3660027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMEE, ALFRED A
1564 N.W. AMHERST DR
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

LAWRENCE, MICHAEL A
6 CASEY LANE
OKEECHOBEE, FL 34974 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: MICHAEL A. LAWRENCE

04/26/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MURPHY, JEAN A
Address: 600 S. PARROTT AVE.
City-St-Zip: OKEECHOBEE, FL 34974

Title: V () Delete
Name: MURPHY, ANN R
Address: 12 C CASEY LANE BHR
City-St-Zip: OKEECHOBEE, FL 34974

Title: V () Delete
Name: MURPHY, EUGENE R
Address: 12 C CASEY LANE BHR
City-St-Zip: OKEECHOBEE, FL 34974

Title: ST () Delete
Name: LAWRENCE, MICHAEL A
Address: 600 S. PARROTT AVE.
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MURPHY, JEAN A
Address: 6 CASEY LANE
City-St-Zip: OKEECHOBEE, FL 34974

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

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

Title: ST (X) Change () Addition
Name: LAWRENCE, MICHAEL A
Address: 6 CASEY LANE
City-St-Zip: OKEECHOBEE, FL 34974

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL A. LAWRENCE

ST

04/26/2003

Electronic Signature of Signing Officer or Director

Date