

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000120438

**FILED**  
**May 10, 2007**  
**Secretary of State****Entity Name:** MURPHY COMMERCIAL REALTY, INC.**Current Principal Place of Business:**513 N BELCHER RD  
SUITE A  
CLEARWATER, FL 33765**New Principal Place of Business:****Current Mailing Address:**2196 MAIN STREET  
SUITE E  
DUNEDIN, FL 34698**New Mailing Address:****FEI Number:** 52-2412675**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MURPHY, ROGER  
2196 MAIN STREET  
SUITE E  
DUNEDIN, FL 34698 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**OFFICERS AND DIRECTORS:****Title:** STDC ( ) Delete  
**Name:** MURPHY, ROGER  
**Address:** 2196 MAIN STREET, SUITE E  
**City-St-Zip:** DUNEDIN, FL 34698**Title:** VD ( ) Delete  
**Name:** MURPHY, KATHLEEN L  
**Address:** 2771 MCNAIR DRIVE  
**City-St-Zip:** PALM HARBOR, FL 34683**Title:** PD ( ) Delete  
**Name:** OGILVIE, MICHAEL  
**Address:** 16 EAGLE LANE  
**City-St-Zip:** PALM HARBOR, FL 34683**Title:** VPD (X) Delete  
**Name:** OGILVIE, KATHLEEN  
**Address:** 16 EAGLE LANE  
**City-St-Zip:** PALM HARBOR, FL 34683**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** PD (X) Change ( ) Addition  
**Name:** MCCORD, CARY  
**Address:** 2707 WOODHALL TERRACE  
**City-St-Zip:** PALM HARBOR, FL 34685**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: ROGER J MURPHY

STDC

05/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date