


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90558 021 ***150.00

DOCUMENT # P03000147010 1. Entity Name ROBERT MURRAY CONSTRUCTION, INC.					
Principal Place of Business 2930 SW 23RD TERRACE #208 GAINESVILLE, FL 32608			Mailing Address 2930 SW 23RD TERRACE #208 GAINESVILLE, FL 32608		
2. Principal Place of Business 3339 N.W. 93rd Lane <small>Suite, Apt. #, etc.</small>		3. Mailing Address 3339 N.W. 93rd Lane <small>Suite, Apt. #, etc.</small>			
City & State BRANFORD, FL Zip 32008 Country U.S.A.		City & State BRANFORD, FL Zip 32008 Country U.S.A.		4. FEI Number 20-0448909 <div style="float: right;"> <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				04292005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent MURRAY, ROBERT 2930 SW 23RD TERRACE #208 GAINESVILLE, FL 32608			7. Name and Address of New Registered Agent Name ROBERT MURRAY Street Address (P.O. Box Number is Not Acceptable) 3339 N.W. 93rd Lane City BRANFORD FL Zip Code 32008		
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 ROBERT MURRAY <i>Robert Murray</i> 4/29/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MURRAY, ROBERT 2930 SW 23RD TERRACE #208 GAINESVILLE, FL 32608		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MURRAY, ROBERT 3339 NW 93rd Lane Branford, FL 32008	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: ROBERT MURRAY <i>Robert Murray</i> 4/29/05 (352) 316-3027 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					