

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000149315

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** DAVID G. MURPHY RESIDENTIAL CONTRACTOR, INC.

**Current Principal Place of Business:**

2726 ASHBURY LANE  
CANTONMENT, FL 32533

**New Principal Place of Business:**

**Current Mailing Address:**

2726 ASHBURY LANE  
CANTONMENT, FL 32533

**New Mailing Address:**

**FEI Number:** 32-0101548

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURPHY, JENNIE LYNN  
2726 ASHBURY LANE  
CANTONMENT, FL 32533 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: PD  
Name: MURPHY, DAVID G  
Address: 2726 ASHBURY LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: STD  
Name: MURPHY, JENNIE LYNN  
Address: 2726 ASHBURY LANE  
City-St-Zip: CANTONMENT, FL 32533

I hereby 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 all other like empowered.

SIGNATURE: JENNIE LYNN MURPHY

STD

04/22/2012

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

\_\_\_\_\_  
Date