


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000019837 1. Entity Name F.L. MURRAY MASONARY, INC.	
--	---

Principal Place of Business 6274 NW 61ST LANE HOME OCALA, FL 34482 US	Mailing Address 6274 NW 61ST LANE HOME OCALA, FL 34482 US
--	--



01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 26-0079241	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MURRAY, FREDRICK 6274 NW 61ST LANE OCALA, FL 34482

DO NOT WRITE IN THIS SPACE

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 <i>Fredrick Murray</i> <small>Signature, typed or printed name of registered agent and title if applicable</small>	<i>FREDRICK MURRAY</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>	<i>Jan-1-5-07</i> <small>DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MURRAY, FREDRICK L 6274 NW 61ST LANE OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000578837 01/03/07-80044-012 150.00 DO NOT WRITE IN THIS SPACE
--

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Fredrick Murray</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <i>FREDRICK MURRAY</i>	<i>Jan-1-5-07</i> <small>Date</small> <i>(352)-362-1540</i> <small>Daytime Phone #</small>
--	---