

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90060 037 ***150.00

DOCUMENT # P04000040672	
1. Entity Name MURRAY ENGINEERING INCORPORATED	

40048238



Principal Place of Business 5624 DIANTHUS ST GREEN COVE SPRINGS, FL 32043	Mailing Address 5624 DIANTHUS ST GREEN COVE SPRINGS, FL 32043
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2. Principal Place of Business - No P.O. Box # 417 WALNUT STREET	3. Mailing Address 417 WALNUT STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.

03292007 Chg-P CR2E034 (12/06)

City & State GREEN COVE SPRINGS, FL	City & State GREEN COVE SPRINGS, FL
Zip 32043	Country U.S.A.
Zip 32043	Country U.S.A.

4. FEI Number 20-0816638	Applied For ☐ Not Applicable
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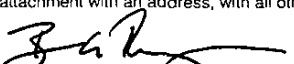
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MURRAY, BRYAN A 5624 DIANTHUS ST GREEN COVE SPRINGS, FL 32043	
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL Zip Code	

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  BRYAN A. MURRAY PRESIDENT	DATE 3/29/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing.)	

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD MURRAY, BRYAN A 5624 DIANTHUS ST GREEN COVE SPRINGS, FL 32043 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MURRAY, SCOTT D 482 CHELSEA PLACE AVE. ORMOND BEACH, FL 32174 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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:  BRYAN A. MURRAY PRESIDENT	DATE 3/29/07 (904) 284-1730
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
Date Daytime Phone #	