

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134176

Entity Name: MUIRFIELD SUPPLY, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

9870 CURRIE DAVIS DRIVE
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2620
BRANDON, FL 33509

New Mailing Address:

FEI Number: 20-1682611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESCH, NORRIS
9422 WILLOW COVE COURT
TAMPA, FL 33647 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: LESCH, NORRIS
Address: 9422 WILLOW COVE COURT
City-St-Zip: TAMPA, FL 33647

Title: S () Change (X) Addition
Name: GUNN, JOHN
Address: 5122 FAIRWAY ONE DRIVE
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NORRIS LESCH

P

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date