


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P05000043292</b> 1. Entity Name <b>MURRAY SEPTIC TANK, INC.</b>	
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FILED

2007 SEP 17 PM 4:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business <b>1543 BIG OAK PLACE FERNANDINA BEACH, FL 32034-6928</b>	Mailing Address <b>1543 BIG OAK PLACE FERNANDINA BEACH, FL 32034-6928</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
City & State  Zip      Country	City & State  Zip      Country



08102007    Chg-P      CR2E034 (12/06)

4. FEI Number <b>05-0619723</b>	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>MURRAY, KENNETH E 1543 BIG OAK PL FERNANDINA BEACH, FL 32034-7377</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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: *Kenneth Murray*      DATE: 9-13-07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MURRAY, KENNETH E</b>	NAME	400109522534
STREET ADDRESS	<b>1543 BIG OAK PL</b>	STREET ADDRESS	09/17/07--01045-023 **150.00
CITY-ST-ZIP	<b>FERNANDINA BEACH, FL 320347377</b>	CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MURRAY, HARRIET</b>	NAME	
STREET ADDRESS	<b>1543 BIG OAK PL</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>FERNANDINA BEACH, FL 320347377</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: *Kenneth Murray*      **KENNETH MURRAY**      DATE: 9-13-07      DAYTIME PHONE #: 904753-7558

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

9/18/07