

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113642

**FILED**  
**Feb 24, 2007**  
**Secretary of State**

**Entity Name:** PLAZA MANAGEMENT SERVICES COMPANY

**Current Principal Place of Business:**

46 N WASHINGTON BLVD  
SUITE 18  
SARASOTA, FL 34236

**New Principal Place of Business:**

1519 BAY HILL CIRCLE  
SARASOTA, FL 34232

**Current Mailing Address:**

46 N WASHINGTON BLVD  
SUITE 18  
SARASOTA, FL 34232

**New Mailing Address:**

1519 BAY HILL CIRCLE  
SARASOTA, FL 34232

**FEI Number:** 20-3366657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURCHISON, ROBERT  
46 N WASHINGTON BLVD  
SUITE 18  
SARASOTA, FL 34232 US

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

MURCHISON, ROBERT  
1519 BAY HILL CIRCLE  
SARASOTA, FL 34232 US

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:** ROBERT W. MURCHISON

02/24/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PRES ( ) Delete  
**Name:** MURCHISON, ROBERT W  
**Address:** 46 N WASHINGTON BLVD SUITE 18  
**City-St-Zip:** SARASOTA, FL 34232

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PRES (X) Change ( ) Addition  
**Name:** MURCHISON, ROBERT W  
**Address:** 1519 BAY HILL CIRCLE  
**City-St-Zip:** SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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:** ROBERT W. MURCHISON

PRES

02/24/2007

Electronic Signature of Signing Officer or Director

Date