## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000003607

Entity Name: MURPHY BUSINESS & FINANCIAL CORPORATION

FILED Mar 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
513 NORTH BELCHER ROAD SUITE A CLEARWATER, FL 33765				513 NORTH BELCHER ROAD CLEARWATER, FL 33765			
Current Mailing Address:				New Mailing Address:			
513 NORTH BELCHER ROAD SUITE A CLEARWATER, FL 33765				513 NORTH BELCHER ROAD CLEARWATER, FL 33765			
FEI Number: 20-4084873 FEI Number Applied For ( ) FEI Number			FEI Num	mber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
8200 BRYA LARGO, FL	TEVEN W P.A .N DAIRY ROA . 33777 US	ND SUITE 300					
The above in the State		ubmits this statement for the purp	ose of	changing its	s registered o	office or registere	ed agent, or both,
SIGNATUR							
	Electroni	ic Signature of Registered Agent				Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$			
Title: Name: Address: City-St-Zip: Title: Name: Address:	MURPHY, ROGI 513 NORTH BEI CLEARWATER,	CHER ROAD SUITE A FL 33765 Delete AS		Title: Name: Address: City-St-Zip: Title: Name: Address:	MURPHY, ROO 513 NORTH BI CLEARWATER DEVP (X MILLER, THOM	ELCHER ROAD R, FL 33765 <) Change ( ) Additi	
City-St-Zip: Title: Name: Address: City-St-Zip:	MESA, AZ 5820	J3 Delete		City-St-Zip: Title: Name: Address: City-St-Zip:	MESA, AZ 582  VP ( SINCLAIR, JAN 513 N BELCHE CLEARWATER	) Change (X) Additi MES ER ROAD	on
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP ( RAPTOULIS, S 513 N. BELCH CLEARWATER	HER RD.	on
Title: Name: Address: City-St-Zip:	( )	Delete	,	Title: Name: Address: City-St-Zip:	VP ( WALSH, KATH 513 N. BELCH CLEARWATER	ER RD.	on
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	CFO ( GRAMMER, LE 513 N. BELCH CLEARWATER	ER ROAD	on

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: ROGER J. MURPHY PRES 03/30/2007