

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000111342

Entity Name: MURRELLE MAGIC CARDS, INC.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

20 W. DAKIN
KISSIMMEE, FL 34741

New Principal Place of Business:

106 CHURCH ST
KISSIMMEE, FL 34741

Current Mailing Address:

20 W. DAKIN
KISSIMMEE, FL 34741

New Mailing Address:

106 CHURCH ST
KISSIMMEE, FL 34741

FEI Number: 20-5448467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATHAS, JEAN C S, TR
20 W DAKIN AVE
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

ATHAS, JEAN C S, TR
1433 KINGSTON WAY
KISSIMMEE, FL 34744 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: JEAN C ATHAS

03/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S,TR () Delete
Name: ATHAS, JEAN C
Address: 1433 KINGSTON WAY
City-St-Zip: KISSIMMEE, FL 34744

Title: P () Delete
Name: MASON, MARI A
Address: 2292 JESSICA LANE
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JEAN C ATHAS

S/T

03/19/2009

Electronic Signature of Signing Officer or Director

Date