

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P07000110225

1. Entity Name

MURPHY'S GOLF ACADEMY INC.



FILED

08 OCT -9 PM 4: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

11601 4TH STREET NORTH
702
ST. PETERSBURG FL 33716

Mailing Address

11601 4TH STREET NORTH
702
ST. PETERSBURG FL 33716

2. Principal Place of Business - No P.O. Box #

1007 Cypress Village Blvd

Suite, Apt. #, etc.

3. Mailing Address

1007 Cypress Village Blvd

Suite, Apt. #, etc.

City & State

Ruskin, Florida

Zip

33573

Country

USA

City & State

Ruskin, Florida

Zip

33573

Country

USA

4. FEI Number

59-3333806

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MURPHY, BRIANNE L
11601 4TH STREET NORTH
702
ST. PETERSBURG FL 33716

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1007 Cypress Village Blvd

City
Ruskin

FL

Zip Code

33573

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

Signature of registered agent (and if applicable, the corporation)

(NOTE: Registered Agent signature required when reappointing)

9-1-08

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY: September 3, 2008

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MURPHY, BRIANNE L
11601 4TH STREET NORTH #702
ST. PETERSBURG FL 33716 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
GUNNIP, CHERYL A
10422 TULIP FIELD WAY
RIVERVIEW FL 33569 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Emily Beaver
6301 South Westshore Blvd #1002
Tampa Florida 33616 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
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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 empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/08

Date

187-667-2939

Daytime Phone #