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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P21956** (8)

1. Corporation Name

R.W. MURRAY CONSTRUCTION CO.



Principal Place of Business

**5402 BEAUMONT CENTER BLVD
STE 104
TAMPA FL 33634
US**

Mailing Address

**1750 S BRENTWOOD BLVD
STE 701
ST LOUIS MO 63144
US**

3. Date Incorporated or Qualified
12/02/1988

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

21 **5425 Beaumont Center Blvd.**

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite 918**

27

City & State

City & State

23 **Tampa**

28

Zip

Country

Zip

Country

24 **FL**

25 **33634**

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or officer if applicable

(NOTE: Registered Agent signature required when making change)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **COOK, JEFFREY**
STREET ADDRESS **1750 S BRENTWOOD BLVD STE 701**
CITY-STATE-ZIP **ST. LOUIS MO**

TITLE **P** ☐ DELETE

NAME **ARNOLDY, RICHARD R**
STREET ADDRESS **1750 S BRENTWOOD BLVD STE 701**
CITY-STATE-ZIP **TAMPA FL**

TITLE **S** ☒ DELETE

NAME **ARNOLDY, NANCY**
STREET ADDRESS **1750 S BRENTWOOD BLVD STE 701**
CITY-STATE-ZIP **ST. LOUIS MO**

TITLE **Vice President** ☐ DELETE

NAME **~~Gregory M. Albers~~**
STREET ADDRESS **~~5425 Beaumont Center Blvd., Suite 918~~**
CITY-STATE-ZIP **~~Tampa, FL 33634~~**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Secretary** ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

Vice President ☐ Change ☒ Addition

**Gregory M. Albers
5425 Beaumont Center Blvd., Suite 918
Tampa, FL 33634**

Chief Financial Officer/Treas. ☐ Change ☒ Addition

**Stephen F. Holste
1750 S. Brentwood Blvd., Suite 701
St. Louis, MO 63144**

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN F. HOLSTE 3/28/96 314/863-0715

Date

Telephone #

CR2E034 (12/95)