

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90081 045 ***150.00

DOCUMENT # P21956

1. Entity Name
R.W. MURRAY CONSTRUCTION CO.



Principal Place of Business

**15500 LIGHTWAVE DRIVE
SUITE 100
CLEARWATER, FL 33760 US**

Mailing Address

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



04212005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-1480225

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	COOK, JEFFREY
STREET ADDRESS	1750 S BRENTWOOD BLVD STE 701
CITY - ST - ZIP	ST. LOUIS, MO
TITLE	P
NAME	ARNOLDY, RICHARD R
STREET ADDRESS	1750 S BRENTWOOD BLVD STE 701
CITY - ST - ZIP	TAMPA, FL
TITLE	V
NAME	ALBERS, GREGORY M
STREET ADDRESS	5425 BEAUMONT CENTER BLVD SUITE 91B
CITY - ST - ZIP	TAMPA, FL
TITLE	T
NAME	HOLSTE, STEPHEN F
STREET ADDRESS	1750 S BRENTWOOD BLVD SUITE 701
CITY - ST - ZIP	ST LOUIS, MO
TITLE	V
NAME	CLEMENTS, FREDERICK P III
STREET ADDRESS	5425 BEAUMONT CENTER BLVD STE 91B
CITY - ST - ZIP	TAMPA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/05
Date

314-963-0715
Daytime Phone #