

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000012873

FILED
Apr 11, 2005
Secretary of State

Entity Name: MURPHY-DOUGLAS PAINTING, INC.

Current Principal Place of Business:

P O BOX 5464
SARASOTA, FL 342775464

New Principal Place of Business:

Current Mailing Address:

P O BOX 5464
SARASOTA, FL 342775464

New Mailing Address:

FEI Number: 65-0393285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, NADIA
3318 BOUGAINVILLEA ST.
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

MURPHY, NADIA
3318 BOUGAINVILLEA ST.
SARASOTA, FL 34239 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:

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURPHY, TIM
Address: 3318 BOUGAINVILLEA STR
City-St-Zip: SARASOTA, FL

Title: VD () Delete
Name: DOUGLAS, DAVID
Address: 2831 TRINIDAD ST.
City-St-Zip: SARASOTA, FL

Title: STD () Delete
Name: MURPHY, NADIA
Address: 3318 BOUGAINVILLEA STR
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: TIM MURPHY

PD

04/11/2005

Electronic Signature of Signing Officer or Director

Date