

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000090463

Entity Name: MURRAY SERVICES INC.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

802 PARKER STREET  
JACKSONVILLE, FL 32206 US

**New Principal Place of Business:**

**Current Mailing Address:**

802 PARKER ST  
JACKSONVILLE, FL 32206

**New Mailing Address:**

FEI Number: 59-3292201

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELKINS, J H JR  
720 ST. JOHNS BLUFF ROAD  
#4  
JACKSONVILLE, FL 32225 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: MURRAY, LAMAR  
Address: 801 EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL

Title: D  
Name: MURRAY, KEITH  
Address: 802 LIBRA STREET  
City-St-Zip: JACKSONVILLE, FL

I hereby 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 all other like empowered.

SIGNATURE: LAMAR MURRAY

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04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date