

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 4-12-96 BC

PROFIT
CORPORATION
ANNUAL REPORT

1996

DOCUMENT # P95000020440 (0)

1. Corporation Name

MURDOCK ENTERPRISES, INC.



FLORIDA DEPARTMENT OF STATE
Corporation Records
3555 -C

Principal Place of Business

4741 ATLANTIC BLVD., SUITE B-5
JACKSONVILLE FL 32207-2168

Mail Address

4741 ATLANTIC BLVD., SUITE B-5
JACKSONVILLE FL 32207-2168



2. Principal Place of Business

21 Suite Apt. # 10

22 City & State

23 Zip

24

2a. Mailing Address

26 Suite Apt. # 10

27 City & State

28 Zip

29

9. Name and Address of Current Registered Agent

GRISSETT, W.E. JR.
4741 ATLANTIC BLVD., SUITE B-5
JACKSONVILLE FL 32207-2168

3. Date of Incorporation

03/13/1995

3a. Date of Last Report

4. FID Number

59-3368791

Applied For
Not Applicable

5. Corporation of State (Leave Blank)

\$8.75 Additional
Fee Required

6. Election to Incorporate in the
United States (Leave Blank)

\$5.00 May Be
Added to Fees

8. This corporation is not a foreign corporation under the 1993 Act.
Yes ☐ No ☐

10. Name and Address of New Registered Agent

81 Name

82 Street Address of Office Number (Not Applicable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Chapter 607, Florida Statutes, I, the undersigned, hereby certify that the information contained in this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, is true and correct, and I have accepted the appointment as registered agent. I am not the owner of the corporation and I am not a director or officer of the corporation.

SIGNATURE

12

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

13.

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (FILL IN)

☐ Change ☒ Addition

P/D

Murdock, Kelly D.
9220 Lem Turner Road
Jacksonville, FL 32208

☐ Change ☒ Addition

S/T/D

Murdock, Christopher M.
9220 Lem Turner Road
Jacksonville, FL 32208

☐ Change ☒ Addition

AS/D

Grissett, W. E., Jr.
4741 Atlantic Blvd., Suite B-5
Jacksonville, FL 32207-2168

☐ Change ☐ Addition

SIGNATURE:

W. E. Grissett, Jr.,

SIGNATURE OF OFFICER OR DIRECTOR

4/11/96 (904) 398-5500

CR2E034 (12/95)