

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90016 013 ***150.00

0320968

DOCUMENT # P97000080240

1. Entity Name

JEFFREY THOMAS MURPHY BUILDERS, INC.

Principal Place of Business

**109 CANTON ROAD
 LAKE WORTH FL 33467**

Mailing Address

**109 CANTON ROAD
 LAKE WORTH FL 33467**

2. Principal Place of Business

27 MILLER ROAD

Suite, Apt. #, etc.

3. Mailing Address

27 MILLER ROAD

Suite, Apt. #, etc.

City & State

LAKE WORTH

Zip **33461**

Country

USA

City & State

LAKE WORTH

Zip

Country

USA

4. FEI Number

65-0789451

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MURPHY, JEFFREY T
 109 CANTON ROAD
 LAKE WORTH FL 33467**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

JEFFREY T. MURPHY

(NOTE: Registered Agent signature required when reinstating)

1-21-01

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **MURPHY, JEFFREY T**
 STREET ADDRESS **109 CANTON ROAD**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VICE PRESIDENT OF SALES** ☐ Change ☒ Addition
 NAME **JULIAN BUTLER**
 STREET ADDRESS **10631 NW 41ST STREET**
 CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **VICE PRESIDENT OF OPERATIONS** ☐ Change ☒ Addition
 NAME **DOUGLAS MADHULAN**
 STREET ADDRESS **10936 GRANITE STREET**
 CITY-ST-ZIP **BOLTA RATON FL 33428**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

13. 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 11 or Block 12 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

JEFFREY T. MURPHY

1-21-01

Date

Daytime Phone #

561-436-2765

CR2E034 (10/00)