2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Aug 10, 2005 08:00 AM Secretary of State DOCUMENT # P97000083443 MURPHY CONSTRUCTION OF PINELLAS, INC. Principal Place of Business Mailing Address 3883 46TH AVE. S. 3883 46TH AVE, S. SAINT PETERSBURG, FL 33711 SAINT PETERSBURG, FL 33711 04222005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied Far 59-3470784 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent NABOZNY, KIRK S DO NOT WRITE 3883 46TH AVE. S. SAINT PETERSBURG, FL 33711 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. DATE Commence of the second Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaling) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution, Added to Fees OFFICERS AND DIRECTORS 10. TITLE 1000000376057 NAME NABOZNY, KIRK S 08/10/05-80001-018 550.00 3883 46TH AVE. S. STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33711 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Little Bridge College Blanch a smalle faller o

12. I hereby certify that the information supplied with this filling 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.

Taka ka ka walanga mga jalah

SIGNATURE: .

-SYREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

721-430-6248