

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 18, 2001 8:00 am**  
**Secretary of State**

05-18-2001 91282 001 \*\*\*\*\*8.75  
 05-18-2001 91282 002 \*\*\*150.00

72629



DO NOT WRITE IN THIS SPACE

**DOCUMENT # P99000085375**

1. Entity Name  
**MURVILLE, INC.**

Principal Place of Business  
**285 HARWICK STREET**  
**PORT CHARLOTTE FL 33952**

Mailing Address  
**285 HARWICK STREET**  
**PORT CHARLOTTE FL 33952**

2. Principal Place of Business

3. Mailing Address

**25050 SANDHILL BLVD**  
 Suite, Apt. #, etc.  
**781**

**P.O. Box 9094**  
 Suite, Apt. #, etc.

City & State  
**PUNTA GORDA, FL**  
 Zip  
**33983**  
 Country  
**U.S.A.**

City & State  
**PORT CHARLOTTE, FL**  
 Zip  
**33949-9094**  
 Country  
**U.S.A.**

4. FEI Number **65-0951949**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WEIR, VERNAL JR.**  
**285 HARWICK STREET**  
**PORT CHARLOTTE FL 33952**

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 **VERNAL WEIR JR**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**APRIL 29<sup>th</sup> 2001**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
**PD**  
 NAME  
**WEIR, VERNAL JR.**  
 STREET ADDRESS  
**285 HARWICK STREET**  
 CITY-ST-ZIP  
**PORT CHARLOTTE FL 33952**

☐ Delete

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 STREET ADDRESS  
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☐ Change ☐ Addition

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: **VERNAL WEIR JR**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**APRIL 29, 2001 941-268-7922**

CR2E034 (10/00)