

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S33375

FILED
Apr 22, 2005
Secretary of State

Entity Name: SHAMUS MURPHY ENTERPRISES, INC.

Current Principal Place of Business:

621 BROOKHAVEN DR
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

621 BROOKHAVEN DR
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-3071968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, EUGENE T.
621 BROOKHAVEN
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

MURPHY, EUGENE T
621 BROOKHAVEN
ORLANDO, FL 32803 US

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: EUGENE T. MURPHY

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MURPHY, EUGENE T
Address: 621 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL

Title: S () Delete
Name: MURPHY, FRANCES G.
Address: 621 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL

Title: VP () Delete
Name: MURPHY, C
Address: 621 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MURPHY, EUGENE T
Address: 621 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32803

Title: S (X) Change () Addition
Name: MURPHY, FRANCES G
Address: 621 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32803

Title: VP (X) Change () Addition
Name: MURPHY, CHRISTOPHER
Address: 621 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32804

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: EUGENE T. MURPHY

PRES

04/22/2005

Electronic Signature of Signing Officer or Director

Date