

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 29, 2008 8:00 am**  
**Secretary of State**

02-29-2008 90027 002 \*\*\*150.00

**DOCUMENT # S70082**

1. Entity Name  
**KIRKLAND, RUSS, MURPHY & TAPP, P.A.**



Principal Place of Business Mailing Address  
**13577 FEATHER SOUND DRIVE** **13577 FEATHER SOUND DRIVE**  
**SUITE 400** **SUITE 400**  
**CLEARWATER, FL 33762-5539 US** **CLEARWATER, FL 33762-5539 US**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02142008 Chg-P CR2E034 (12/06)

4. FEI Number  
**59-3076061**

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

**RASMUSSEN, ROBERT C**  
**GLENN RASMUSSEN FOGORTY & HOOKER, PA**  
**100 S. ASHLEY DR #1300**  
**TAMPA, FL 33602**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME TAPP, WILLIAM G  
STREET ADDRESS 455 16TH AVE. NE.  
CITY-ST-ZIP ST. PETERSBURG, FL 33704

TITLE DS ☐ Delete  
NAME RUSS, ANDREW J  
STREET ADDRESS 4306 SWANN AVENUE  
CITY-ST-ZIP TAMPA, FL 33609

TITLE DT ☐ Delete  
NAME MURPHY, BRUCE H  
STREET ADDRESS 951 SO BAYSHORE BLVD  
CITY-ST-ZIP SAFETY HARBOR, FL 34695

TITLE VP ☐ Delete  
NAME KIRKLAND, JACK W JR  
STREET ADDRESS 3302 SIERRA CIR  
CITY-ST-ZIP TAMPA, FL

TITLE D ☐ Delete  
NAME GROVE, STEVEN W  
STREET ADDRESS 9610 DUNCROFT LANE  
CITY-ST-ZIP TAMPA, FL 33626

TITLE D ☐ Delete  
NAME DUNHAM, PAUL C  
STREET ADDRESS 2869 CHELSEA PLACE SOUTH  
CITY-ST-ZIP CLEARWATER, FL 33759

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director ☐ Change ☒ Addition  
NAME Johnson, Daniel J.  
STREET ADDRESS 6205 E. Elberon St.  
CITY-ST-ZIP Tampa, FL 33611

TITLE Director ☐ Change ☒ Addition  
NAME Mull, Cindy A.  
STREET ADDRESS 5819 Blossom Ave.  
CITY-ST-ZIP Tampa, FL 33614

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/08

Date

(727) 572-1400

Daytime Phone #