2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # V00205

1. Entity Name MILLS & MURPHY SOFTWARE SYSTEMS, INC.



Principal Place of Business

DO NOT WRITE IN THIS SPACE

618 -94TH AVE N. ST. PETERSBURG, FL 33702 US

Mailing Address 618 -94TH AVE N.

ST. PETERSBURG, FL 33702

US

FILED Apr 05, 2004 08:00 AM Secretary of State



02232004

No Chg-P

CR2E034 (10/03)

FEI Number	
59-309749	4

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, ED 618 -94TH AVE N. ST. PETERSBURG, FL 33702

DO NOT WRITE IN THIS SPACE

6. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. If am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ing	\$5.00 May 8e Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT P FRANCIS E. MURPHY 2072 HAWAII AVE NE ST. PETERSBURG, FL 33703	TÓRS			U00000103261 04/05/04-80049-003 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						

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 cath; 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.

ED NAME OF SIGNING OFFICER OR DIRECTO