## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Feb 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0) MURRAY PROPERTIES, INC. Principal Place of Business Mailing Address 330 WICKLINE BLVD. 650 JAEGES DR. **DELRAY BEACH FL 33444** LANTANA FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/14/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0357043 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Country Country Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MURRAY, JOHN F. 81 650 JAEGER DR. 82 Street Address (P.O. Box Number is Not Acceptable) DELRAY BEACH FL 33444 63 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 THE MURRAY, JOHN F NAME 12 NAME 650 JAEGER DR. STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Channe Addition TITLE 2.1 TITLE PHILLIPS, JAMES NAME 2.2 NAME 330 WICKLINE BLVD., #6 STREET ADDRESS 2.3 STREET ADDRESS LANTAN FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - 7IP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. 1 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

mulm.

**FILED**