

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000015391

**Entity Name:** DONALD A. MCMURRAY, LLC

**Current Principal Place of Business:**

73 S. PALM AVE, STE. 215  
SARASOTA, FL 34236

**Current Mailing Address:**

1303 LANDINGS DRIVE  
SARASOTA, FL 34231

**FEI Number:** 46-1816824

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCMURRAY, DONALD APH.D.  
1303 LANDINGS DR.  
SARASOTA, FL 34231 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

|                 |                      |                 |                          |
|-----------------|----------------------|-----------------|--------------------------|
| Title           | MGR                  | Title           | MGRM                     |
| Name            | MCMURRAY, DONALD DR. | Name            | MCMURRAY, MEREDITH FLMHC |
| Address         | 1303 LANDINGS DR.    | Address         | 1303 LANDINGS DR.        |
| City-State-Zip: | SARASOTA FL 34231    | City-State-Zip: | SARASOTA FL 34231        |

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DONALD A. MCMURRAY

DR.

04/19/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date