

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001422

Entity Name: C. A. MURREN AND SONS COMPANY, INC.**Current Principal Place of Business:**2275 LOGANVILLE HWY
GRAYSON, GA 30017**Current Mailing Address:**2275 LOGANVILLE HWY
GRAYSON, GA 30017 US**FEI Number: 58-2047805****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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**Officer/Director Detail :**

Title CEO, DIRECTOR, PRESIDENT
Name MURREN , CHARLES A III
Address 2275 LOGANVILLE HWY
City-State-Zip: GRAYSON GA 30017

Title PRESIDENT, DIRECTOR
Name MCPHERSON, MICHAEL A
Address 2275 LOGANVILLE HWY
City-State-Zip: GRAYSON GA 30017

Title VP
Name MAY, BRIAN
Address 2275 LOGANVILLE HWY
City-State-Zip: GRAYSON GA 30017

Title SECRETARY
Name RYAN, PATRICK
Address 2275 LOGANVILLE HWY
City-State-Zip: GRAYSON GA 30017

Title TREASURER
Name MURREN, CHARLES ANDREW IV
Address 2275 LOGANVILLE HWY (GA HWY 20)
City-State-Zip: GRAYSON GA 30017

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 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 all other like empowered.

SIGNATURE: CHARLES A. MURREN III**PRESIDENT****02/12/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date