

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001422

FILED
Mar 12, 2004
Secretary of State

Entity Name: C. A. MURREN AND SONS COMPANY, INC.

Current Principal Place of Business:

2275 HIGHWAY 20
GRAYSON, GA 30017

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 729
GRAYSON, GA 30017

New Mailing Address:

FEI Number: 58-2047805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, FELIX
7520 NW 55TH STREET
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MURREN, CHARLES A III
Address: 2275 HIGHWAY 20
City-St-Zip: GRAYSON, GA 30017

Title: P () Delete
Name: MURREN, CHARLES A III
Address: 2275 HIGHWAY 20
City-St-Zip: GRAYSON, GA 30017

Title: P () Delete
Name: MURREN, CHARLES A III
Address: 2275 HIGHWAY 20
City-St-Zip: GRAYSON, GA 30017

Title: S () Delete
Name: MURREN, LINDA C
Address: 2275 HIGHWAY 20
City-St-Zip: GRAYSON, GA 30017

Title: S () Delete
Name: MURREN, LINDA C
Address: 2275 HIGHWAY 20
City-St-Zip: GRAYSON, GA 30017

Title: S () Delete
Name: MURREN, LINDA C
Address: 2275 HIGHWAY 20
City-St-Zip: GRAYSON, GA 30017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHARLES A. MURREN III

P

03/12/2004

Electronic Signature of Signing Officer or Director

Date