

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Linda B. Armstrong  
Secretary of State  
1900 W. TALLAHASSEE AVENUE

APPROVED  
AND  
FILED

DOCUMENT # **L38599**

(1)

To: Corporation Number

**PRIDE HOLDING, INC.**

95 MAY -1 PM 11:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business <b>% LINDA J. PEARCE 2139 PALM BEACH LAKES BLVD W PALM BEACH FL 33409</b>		2a. Mailing Address <b>% LINDA J. PEARCE 2139 PALM BEACH LAKES BLVD W PALM BEACH FL 33409</b>	
2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>	3. Date Incorporated or Qualified <b>01/01/1990</b>	3a. Date of Last Report <b>04/25/1994</b>
State, Apt. # or <b>22</b>	State, Apt. # or <b>27</b>	4. FEI Number <b>65-0165895</b>	Applied For Not Applicable
City & State <b>23</b>	City & State <b>28</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
Zip <b>24</b>	Country <b>29</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
<b>25</b>	<b>30</b>	8. This corporation has liability for obligations under S-199.033 Florida Statute <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>PEARCE, LINDA J. 2139 PALM BEACH LAKES BLVD W PALM BEACH FL 33409</b>		81. Name	10. Name and Address of New Registered Agent	
		82. Street Address (P.O. Box Number Not Acceptable)		
		83.		
		84. City	<b>FL</b>	85. Zip Code

11. Pursuant to the provisions of Sections 607 (2)(3) and 607 (1)(b), 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. The change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the obligations imposed by Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>DC</b>	NAME <b>SEARCY, CHRISTIAN D.</b>	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>2139 PALM BEACH LAKES W PALM BEACH FL</b>	CITY, ST, ZIP	2. NAME	
TITLE <b>DP</b>	NAME <b>DENNEY, EARL L., JR.</b>	3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>2139 PALM BEACH LAKES W PALM BEACH FL</b>	CITY, ST, ZIP	4. NAME	
TITLE <b>DST</b>	NAME <b>PEARCE, LINDA J.</b>	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>2139 PALM BEACH LAKES W PALM BEACH FL</b>	CITY, ST, ZIP	6. NAME	
TITLE	NAME	7. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	NAME	8. NAME	
CITY, ST, ZIP	NAME	9. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	10. CITY, ST, ZIP	
STREET ADDRESS	NAME	11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST, ZIP	NAME	12. NAME	
TITLE	NAME	13. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	NAME	14. CITY, ST, ZIP	
CITY, ST, ZIP	NAME	15. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	16. NAME	
STREET ADDRESS	NAME	17. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST, ZIP	NAME	18. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this report is complete, accurate and true and that my signature shall have the same legal effect as if made in person. I am an officer or director of the corporation or the registered agent or registered agent for service of process on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report. I changed or corrected the information with an address.

SIGNATURE: *Linda J. Pearce, Sec/Treas 4/25/95*