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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # S59812 (5)

1. Corporation Name

FRANKLIN PRINCE, ESQUIRE, P.A.

Principal Place of Business

**515 N FLAGLER DR
Pavilion 300
WEST PALM BEACH FL 33401**

Mailing Address

**515 N FLAGLER DR
SUITE 1450
WEST PALM BEACH FL 33401
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/14/1991

3a. Date of Last Report
03/04/1994

4. FEI Number
65-0268562

Applied For
 Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

21. Suite, Apt. #, etc.
Suite 1450

2a. Mailing Address

26. Suite, Apt. #, etc.
Suite 1450

23. City & State

26. City & State

24. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

**PRINCE, FRANKLIN
515 N FLAGLER DR
Pavilion 300
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. **Suite 1450**

84. City

FL

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 607.0509, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required upon reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	PRINCE, FRANKLIN	515 N FLAGLER DR #300	WEST PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		515 N. Flagler Dr. #1450			

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Franklin Prince **Franklin Prince** **2/28/95** **407 820-1577**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone