FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 3:25

DOCUMENT # **195621** **(8)**

1. Corporation Name
PRINCE INC

Principal Place of Business	Mailing Address
450C RACETRACK RD FT WALTON BCH FL 32547 US	PO BOX 3280 FT WALTON BCH FL 32547 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/01/1956
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business
21 913 Beal Pky
Suite, Apt. #, etc.
22 Ft. Walton Bch, Fl.
City & State
23
Zip 24 32547 Country 25 OKaloosa

2a. Mailing Address
26 450-E Racetrack Rd.
Suite, Apt. #, etc.
27
City & State
28 Ft. Walton Bch, Fl.
Zip 29 32547 Country 30 OKaloosa

4. FEI Number: 59-0777404 ☐ 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 estimated tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PRINCE JR., G L
~~12 W SUNSET BLVD~~ 636 W. Sunset Blvd
FT WALTON BEACH FL ~~32548~~ 32547

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 607.0505, Florida Statutes.

SIGNATURE Catherine E. Prince 4-6-94
Signature, typed or printed name of registered agent and date of signature (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☒ Change ☐ Addition
NAME	PRINCE, G L JR	12 NAME	
STREET ADDRESS	~~12 W SUNSET BLVD~~	13 STREET ADDRESS	636 W. Sunset Blvd.
CITY ST ZIP	FT WALTON BCH, FL 00000	14 CITY ST ZIP	Ft. Walton Bch, Fl. 32547
TITLE	STD	21 TITLE	☒ Change ☐ Addition
NAME	PRINCE, CATHERINE E	22 NAME	
STREET ADDRESS	~~12 W SUNSET BLVD~~	23 STREET ADDRESS	636 W. Sunset Blvd
CITY ST ZIP	FT WALTON BCH, FL 00000	24 CITY ST ZIP	Ft. Walton Bch, Fl. 32547
TITLE	VP	31 TITLE	☐ Change ☐ Addition
NAME	PRINCE, MARK	32 NAME	
STREET ADDRESS	1731 QUAIL PATH	33 STREET ADDRESS	
CITY ST ZIP	FT WALTON BEACH FL	34 CITY ST ZIP	
TITLE	VPD	41 TITLE	☐ Change ☐ Addition
NAME	HENLEY, MITZI	42 NAME	
STREET ADDRESS	801 MELISSA CT	43 STREET ADDRESS	
CITY ST ZIP	FT WALTON BEACH FL	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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: Catherine E. Prince, Sec. Treas. 4-6-94 904 862 8600
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0470364 FP