


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 195621 (8)		
1. Corporation Name PRINCE INC		

Principal Place of Business 913 BEAL PKWY FT. WALTON BEACH FL 32547 US	Mailing Address 450-E RACETRACK RD. FT. WALTON BEACH FL 32547 US
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/01/1956	
21		26		4. FEI Number 59-0777404	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For <input checked="" type="checkbox"/> Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip	25	Country	29	30

9. Name and Address of Current Registered Agent PRINCE JR., G L 636 W. SUNSET BLVD. FT WALTON BEACH FL 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	PRINCE, G L JR	1.2 NAME	
STREET ADDRESS	636 W. SUNSET BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BCH, FL 00000	1.4 CITY-ST-ZIP	
TITLE	STD	2.1 TITLE	
NAME	PRINCE, CATHERINE E	2.2 NAME	
STREET ADDRESS	636 W. SUNSET BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BCH, FL 00000	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	
NAME	PRINCE, MARK	3.2 NAME	
STREET ADDRESS	1731 QUAIL PATH	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BEACH FL	3.4 CITY-ST-ZIP	
TITLE	VPD	4.1 TITLE	
NAME	HENLEY, MITZI	4.2 NAME	
STREET ADDRESS	801 MELUSSA CT	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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: *G. M. B. Prince Jr.* SIGNATURE REQUIRED

1-6-98 850 862 3814

CR2E034 (10/97)