2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825368

Entity Name: KING & PRINCE SEAFOOD CORPORATION

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1 KING & PRINCE BLVD PO BOX 899 BRUNSWICK, GA 31521 **Current Mailing Address: New Mailing Address:** 1 KING & PRINCE BLVD PO BOX 899 BRUNSWICK, GA 31521 FEI Number: 58-0630562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: ATRE (X) Change () Addition WILLIAMS, J L, Name: Name: WATERS, J. GARY 138 COLONIAL DR 1 KING & PRINCE BLVD. Address: Address: City-St-Zip: SAINT SIMONS ISLAND, GA 31522 City-St-Zip: BRUNSWICK, GA 31520 US CD Title: Title: () Delete (X) Change () Addition BRUBAKER, R P, Name: Name: COZ. PAUL 206 SETTLER'S ROAD 128 ROGERS STREET Address: Address: SAINT SIMONS ISLAND, GA 31522 GLOUCESTER, MA 01930 US City-St-Zip: City-St-Zip: Title: (X) Change () Addition VD. () Delete Title: TRFA SULLIVAN, D.J., SHIGEMITSU, MAKOTO Name: Name: 1407 S WINWARD DR 15400 NORTHEAST 90TH STREET Address: Address: SAINT SIMONS ISLAND, GA 31522 City-St-Zip: REDMOND, WA 97019 US City-St-Zip: Title: () Delete Title: () Change () Addition MENTZER, RUSSELL S Name: Name: Address: 106 SEMINOLE Address: City-St-Zip: SAINT SIMONS ISLAND, GA 31522 City-St-Zip: Title: Title: SD (X) Delete () Change () Addition EASON, WILLIAM Name: Name: 105 ENCLAVE WAY Address: Address: City-St-Zip: SAINT SIMONS ISLAND, GA 31522 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: J. GARY WATERS ATRE 04/28/2006