

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

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED
95 MAY -1 AM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 858145 (6)
1. Corporation Name
PREMIER CRUISE LINES, LTD., INC.

Principal Place of Business Mailing Address
**400 CHALLENGER RD.
CAPE CANAVERAL FL 32920** **400 CHALLENGER RD.
CAPE CANAVERAL FL 32920**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/17/1983** 3a. Date of Last Report **04/10/1994**
4. FEI Number **59-2315907** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional
Fee Required**
6. Election Campaign Financing **\$5.00 May Be
Trust Fund Contribution Added to Fees**
7. This Corporation has liability for intangible tax under S. 189.032,
Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**POPP, GREGORY A
101 GEORGE KING BLVD., SUITE 4
CAPE CANAVERAL FL 32920**

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 _____ DATE _____
Sign: in typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	CHADWICK, MICHAEL J
STREET ADDRESS	400 CHALLENGER RD.
CITY-ST-ZIP	CAPE CANAVERAL FL
TITLE	S
NAME	EMERSON, FREDERICK G
STREET ADDRESS	DIAL TOWER, #2249
CITY-ST-ZIP	PHOENIX AZ
TITLE	T
NAME	NELSON, RONALD G
STREET ADDRESS	DIAL TOWER, #2249
CITY-ST-ZIP	PHOENIX AZ
TITLE	C
NAME	RAGO, NICHOLAS A.
STREET ADDRESS	DIAL TOWER, #2249
CITY-ST-ZIP	PHOENIX AZ
TITLE	A.S.
NAME	LITHERLAND, J. M.
STREET ADDRESS	DIAL TOWER - 2249
CITY-ST-ZIP	PHOENIX AZ 85077-2249
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	P. SIM NAIK
1.3 STREET ADDRESS	400 CHALLENGER RD.
1.4 CITY-ST-ZIP	CAPE CANAVERAL FL
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	A.S. LITHERLAND, J. M.
5.3 STREET ADDRESS	DIAL TOWER - 2249
5.4 CITY-ST-ZIP	PHOENIX AZ 85077-2249
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 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: *J.M. Litherland* **J.M. LITHERLAND, Asst Sec'y, 4/10/95**
M.M. (802) 207-5736