

DUE BY MAY 1, 2007

DOCUMENT # A01000001352

1. Entity Name

PRINCE FAMILY LIMITED PARTNERSHIP



FILED
Mar 05, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

**3351 N 36TH PLACE
HOLLYWOOD FL 33021**

**3351 N 36TH PLACE
HOLLYWOOD FL 33021**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E003 (10/06)

City & State

City & State

4. FEI Number

65-1158683

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ATKINSON, WILSON C III, ESQ
%ATKINSON, DINER, STONE, MANKUTA & PLOUCHA
1946 TYLER STREET
HOLLYWOOD FL 33020**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

FILE NOW!!! Fee is \$500. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

P01000093567

PRINCE MANAGEMENT, INC.

3351 N 36TH PLACE

HOLLYWOOD FL 33021

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
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03/15/07-00020-006 500.00**

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STREET ADDRESS

CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Essie Prince

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE