FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **J98978** **(6)**

1. Corporation Name

PRINCESS CHARTERS, INC.

Principal Place of Business	Mailing Address
~~5487 SW ANHINGA AVE~~ ~~3727 S.E. OCEAN BLVD., STE. 101~~ ~~PALM CITY FL 34990-4036~~ ~~US~~	~~5487 SW ANHINGA AVE~~ ~~3727 S.E. OCEAN BLVD., STE. 101~~ ~~PALM CITY FL 34990-4036~~ ~~US~~

3. Date Incorporated or Qualified: **10/15/1987**
3a. Date of Last Report: **06/26/1995**

2. Principal Place of Business
21: 5487 SW Anhinga Ave
22: Suite, Apt. #, etc.
23: City & State: Palm City, FL.
24: Zip: 34990-4036
25: Country: USA

2a. Mailing Address
26: 5487 SW Anhinga Ave.
27: Suite, Apt. #, etc.
28: City & State: Palm City FL.
29: Zip: 34990-4036
30: Country: USA

4. FEI Number: **65-0091501** ☐ 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 intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DOANE, DONALD D.
5487 SW ANHINGA AVNUE
[redacted]
PALM CITY FL 34990 - 4036

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: Donald D. Doane, pres. DATE: 4/23/96
Signature, type or print name of registered agent. If agent is a firm, type or print name of individual signing on behalf of firm. (NOTE: Registered Agent's signature required for processing.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	President, VP, Sec/Treas.	☒ Change ☐ Addition
NAME	KELLER, LOUIS, JR.		1.2 NAME	DONALD D. DOANE	
STREET ADDRESS	220 SANFORD AVE.		1.3 STREET ADDRESS	5487 SW ANHINGA AVE.	
CITY-ST-ZIP	PALM BEACH FL		1.4 CITY-ST-ZIP	PALM City, FL. 34990-4036	
TITLE	PTD	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DOANE, DONALD D.		2.2 NAME		
STREET ADDRESS	5487 ANHINGA DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

5/1/96
200.00 DP

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: Donald D. Doane, pres. 4/23/96 407/287-9034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)