

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027507

FILED  
Apr 24, 2007  
Secretary of State

**Entity Name:** PRINCE ENTERPRISES OF NWF, L.L.C.

**Current Principal Place of Business:**

POST OFFICE BOX 190  
FORT WALTON BEACH, FL 32549

**New Principal Place of Business:**

450 E. RACETRACK RD.  
FORT WALTON BEACH, FL 32547

**Current Mailing Address:**

POST OFFICE BOX 190  
FORT WALTON BEACH, FL 32549

**New Mailing Address:**

FEI Number: 20-2528041      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOSTER, W. SCOTT  
909 MAR WALT DRIVE  
SUITE 1014  
FORT WALTON BEACH, FL 32549 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HENLEY, MITZI PRINCE  
Address: P.O. BOX 190  
City-St-Zip: FORT WALTON BEACH, FL 32549

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MITZI P. HENLEY

M

04/24/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date