

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000050331

Entity Name: OLD PRINCETON, INC.

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

500 AUSTRALIAN AVENUE SOUTH
SUITE 120
WEST PALM BEACH, FL 334016246

New Principal Place of Business:

Current Mailing Address:

500 AUSTRALIAN AVENUE SOUTH
SUITE 120
WEST PALM BEACH, FL 334016246

New Mailing Address:

FEI Number: 65-0505167 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODES, PAUL
500 AUSTRALIAN AVENUE SOUTH
SUITE 120
WEST PALM BEACH, FL 334016246 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RHODES, PAUL
Address: 500 AUSTRALIAN AVE SO # 120
City-St-Zip: WEST PALM BEACH, FL 33401

Title: P () Delete
Name: RHODES, PAUL
Address: 500 AUSTRALIAN AVE SO # 120
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PAUL RHODES

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03/13/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date