

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000012311
 1. Entity Name
 THE PRINCE MURAT CORPORATION, INC.



Principal Place of Business: 2881 JEFFERSON ST, MARIANNA, FL 32446
 Mailing Address: P.O. BOX 6356, DOTHAN, AL 36302



03052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3426133
 Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILKINSON, THOMAS C
 2881 JEFFERSON ST
 MARIANNA, FL 32446

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	WILKINSON, THOMAS C
STREET ADDRESS	2881 JEFFERSON ST
CITY-ST-ZIP	MARIANNA, FL 32446
TITLE	VPT
NAME	ELLIS, JAMES C
STREET ADDRESS	P O BOX 6356
CITY-ST-ZIP	DOTHAN, AL 36302
TITLE	VPT
NAME	ELLIS, JAMES C
STREET ADDRESS	11300 APPIAN WAY
CITY-ST-ZIP	DOTHAN, AL 36303
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/02/08-80011-010 150.00

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12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James C. Ellis James C. Ellis, VPT, 3/13/08, 334-792-2153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #