

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000012311

FILED  
Sep 01, 2009  
Secretary of State

Entity Name: THE PRINCE MURAT CORPORATION, INC.

**Current Principal Place of Business:**

2881 JEFFERSON ST  
MARIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6356  
DOTHAN, AL 36302

**New Mailing Address:**

FEI Number: 59-3426133      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WILKINSON, THOMAS C  
2881 JEFFERSON ST  
MARIANNA, FL 32446      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: WILKINSON, THOMAS C  
Address: 2881 JEFFERSON ST  
City-St-Zip: MARIANNA, FL 32446

Title: VPT ( ) Delete  
Name: ELLIS, JAMES C  
Address: P O BOX 6356  
City-St-Zip: DOTHAN, AL 36302

Title: VPT ( ) Delete  
Name: ELLIS, JAMES C  
Address: 11300 APPIAN WAY  
City-St-Zip: DOTHAN, AL 36303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JAMES C. ELLIS

VPT

09/01/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date