

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

95 MAY - 1 PM 2:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **H91181 (8)**

1. Corporation Name  
**TEMPLETON FUNDS TRUST COMPANY**

Principal Place of Business  
**700 CENTRAL AVENUE  
ST. PETERSBURG FL 33701-3628**

Mailing Address  
**700 CENTRAL AVENUE  
ST. PETERSBURG FL 33701-3628**

700001472387  
-05/03/95--01020--003  
\*\*\*\*208.75 \*\*\*\*208.75

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **12/20/1985** 3a. Date of Last Report **04/29/1994**

4. FEI Number **59-2606922** Applied For  Not Applicable

5. Certificate of Status Desired **XX** \$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

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24		29	
25		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Thomas M. Mistele  
700 Central Avenue  
St. Petersburg, FL 33701-3628

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>C</b>
NAME	<b>CAMPBELL, GORDON W.</b>
STREET ADDRESS	<b>1106 CULBREATH ISLES DR.</b>
CITY - ST - ZIP	<b>TAMPA FL</b>
TITLE	<b>D</b>
NAME	<b>BEACH, RICHARD A.</b>
STREET ADDRESS	<b>6487 29TH AVE. NO.</b>
CITY - ST - ZIP	<b>ST. PETERSBURG FL</b>
TITLE	<b>D</b>
NAME	<b>ADCOCK, LOUIE N., JR.</b>
STREET ADDRESS	<b>280 RAFAEL BLVD., N.E.</b>
CITY - ST - ZIP	<b>ST. PETERSBURG FL</b>
TITLE	<b>VP</b>
NAME	<b>ONSAGER, ERLING</b>
STREET ADDRESS	<b>700 CENTRAL AVENUE</b>
CITY - ST - ZIP	<b>ST. PETERSBURG FL</b>
TITLE	<b>PSD</b>
NAME	<b>MISTELE, THOMAS M.</b>
STREET ADDRESS	<b>700 CENTRAL AVE.</b>
CITY - ST - ZIP	<b>ST. PETERSBURG FL</b>
TITLE	<b>SVP</b>
NAME	<b>BAIO, JAMES R.</b>
STREET ADDRESS	<b>500 EAST BROWARD BLVD.</b>
CITY - ST - ZIP	<b>FT. LAUDERDALE FL 33384</b>

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

SP7511

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)(k), 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: *Thomas M. Mistele*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95 813-823-8712

**TEMPLETON FUNDS TRUST COMPANY**

**Continuation of Question No. 12 (Names and Addresses of Each Officer and Director):**

<b>Title</b>	<b>Names of Officers &amp; Directors</b>	<b>Street Address/City &amp; State</b>
V	Shafer, Paul W.	700 Central Ave. St. Petersburg, FL 33701
AVP	Link, Warren F.	700 Central Avenue St. Petersburg, FL 33701
AVP/TO	Malatino, Lonnie V.	700 Central Avenue St. Petersburg, FL 33701
AVP/TO ASSOC. COUNSEL	Reymann, T. Gregory III	700 Central Avenue St. Petersburg, FL 33701
ATO	Chaney, James E.	500 E. Broward Blvd. Ft. Lauderdale, FL 33394
ATO	Forester, Samuel J., Jr.	500 E. Broward Blvd. Ft. Lauderdale, FL 33394
ATO	Mobius, J. Mark	Two Exchange Square Hong Kong
AVP	Lerchenfeld, G. Jeffrey	700 Central Avenue St. Petersburg, FL 33701
AT	Collins, Jack L.	700 Central Avenue St. Petersburg, FL 33701
T/Cont.	DeBellis, Karen S.	700 Central Avenue St. Petersburg, FL 33701
AVP/TO	Ulrich, Ann Margaret	500 E. Broward Blvd. Ft. Lauderdale, FL 33394
D	Watson, Thomas A.	3390 W. Maritana Dr. #2 St. Pete Beach, FL 33706
D	Flanagan, Martin L.	777 Mariners Island Blvd. San Mateo, CA 94404-1585

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<b>Title</b>	<b>Names of Officers &amp; Directors</b>	<b>Street Address/City &amp; State</b>
AVP	Williams, Sharon	700 Central Avenue St. Petersburg, FL 33701
VP Oper.	Smith, Robert W. III	700 Central Avenue St. Petersburg, FL 33701
AVP	Kay, John R.	700 Central Avenue St. Petersburg, FL 33701
AVP (TRUST OFFICER & ASSOC. COUNSEL)	Carter, John K.	700 Central Avenue St. Petersburg, FL 33701
AS	Parks, Susan C.	700 Central Avenue St. Petersburg, FL 33701

TO = Trust Officer

ATO = Assistant Trust Officer