


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 10, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # N01065**  
 1. Entity Name  
**EBON TEMPLE, INC.**



Principal Place of Business 7001 WALLACE ROAD ORLANDO, FL 32819 US	Mailing Address 7001 WALLACE ROAD ORLANDO, FL 32819 US
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**DO NOT WRITE IN THIS SPACE**



08062007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2368131</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 LEE, THOMAS S., JR.  
 4289 LAKE RICHMOND DR  
 ORLANDO, FL 32811

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by September 14, 2007**

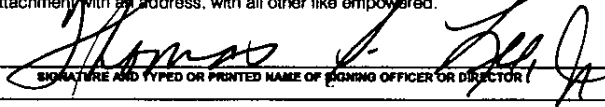
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEE, THOMAS S., JR. 4289 LAKE RICHMOND DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WHITAKER, DOROTHY L. 4325 LAKE RICHMOND DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MITCHELL, BARBARA L. 4325 LAKE RICHMOND DRIVE ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEE, MARY B. 4289 LAKE RICHMOND DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BROWN, ANN 4563 ALHAMA ST ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000771795  
 08/10/07-80001-003 70.00

**DO NOT WRITE IN THIS SPACE**

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 617, 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:**  **08/06/07 407-590-4601**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #