

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01065

FILED  
Apr 10, 2012  
Secretary of State

Entity Name: EBON TEMPLE, INC.

**Current Principal Place of Business:**

7001 WALLACE ROAD  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

7001 WALLACE ROAD  
ORLANDO, FL 32819 US

**New Mailing Address:**

FEI Number: 59-2368131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEE, THOMAS S JR.  
4289 LAKE RICHMOND DR  
ORLANDO, FL 32811 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LEE, THOMAS S., JR.  
Address: 4289 LAKE RICHMOND DR  
City-St-Zip: ORLANDO, FL 32811

Title: VD  
Name: WHITAKER, DOROTHY L.  
Address: 4325 LAKE RICHMOND DR  
City-St-Zip: ORLANDO, FL 32811

Title: VD  
Name: MITCHELL, BARBARA L.  
Address: 4325 LAKE RICHMOND DRIVE  
City-St-Zip: ORLANDO, FL 32811

Title: SD  
Name: LEE, ERICA  
Address: 5683 TULIP AVE  
City-St-Zip: ORLANDO, FL 32839

Title: TD  
Name: BROWN, ANN  
Address: 4563 ALHAMA ST  
City-St-Zip: ORLANDO, FL 32811

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANN BROWN

TD

04/10/2012

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

\_\_\_\_\_  
Date