

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

PROFIT
CORPORATION
ANNUAL REPORT

1996



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

DOCUMENT # **P12763** (9)

1. Corporation Name

FRANKLIN ASSOCIATES, ARCHITECTS, INC.

Principal Place of Business

**142 N. MARKET STREET
P.O. BOX 4048
CHATTANOOGA TN 37405-1048**

Mailing Address

**142 N. MARKET STREET
P.O. BOX 4048
CHATTANOOGA TN 37405-1048**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/23/1986

3a. Date of Last Report

01/24/1995

4. FEI Number

62-0679391

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$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

10. Name and Address of New Registered Agent

**BARKER, TAYLOR EARL
12020 NW 31ST PLACE
SUNRISE FL 33323**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

☒ Change ☐ Addition

NAME
HILBERT, GARY B.
STREET ADDRESS
7410 TWIN BROOK DRIVE
CITY- ST- ZIP
CHATTANOOGA TN

1.2 NAME
1.3 STREET ADDRESS

**7003 Genoa Drive
Chattanooga, TN 37421**

TITLE ☐ DELETE

2.1 TITLE

☒ Change ☐ Addition

NAME
BROWN, HARRY J. JR.
STREET ADDRESS
7003 GENOA DR
CITY- ST- ZIP
CHATTANOOGA TN

2.2 NAME
2.3 STREET ADDRESS

**6336 Old Dayton Pike
Hixson, TN 37343**

TITLE ☐ DELETE

3.1 TITLE

☒ Change ☐ Addition

NAME
BARKER, TERRY W.
STREET ADDRESS
1732 CRESTWOOD DR
CITY- ST- ZIP
CHATTANOOGA TN

3.2 NAME
3.3 STREET ADDRESS

**8011 Turtle Lane
Ooltewah, TN 37363**

TITLE ☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME
FRANKLIN, ROBERT A.
STREET ADDRESS
142 N. MARKET ST.
CITY- ST- ZIP
CHATTANOOGA TN

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

**D
Everett J. Fisher Jr.
602 Spring Lake Ct
Chattanooga, TN 37415**

TITLE ☐ DELETE

5.1 TITLE

☐ Change ☒ Addition

NAME
STREET ADDRESS

5.2 NAME
5.3 STREET ADDRESS

CITY- ST- ZIP

5.4 CITY- ST- ZIP

TITLE

6.1 TITLE

☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY- ST- ZIP

6.4 CITY- ST- ZIP

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:

Harry J. Brown Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-96

Date

423-266-1207

Daytime Phone #

CR2E034 (12/95)