


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000005176
 1. Entity Name
 TEMPLE MANAGEMENT COMPANY



Principal Place of Business
 C/O JOHN W. TEMPLE
 2300 NW CORPORATE BLVD S238
 BOCA RATON, FL 33431 US

Mailing Address
 C/O JOHN W. TEMPLE
 2300 NW CORPORATE BLVD S238
 BOCA RATON, FL 33431 US



01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 65-0390895 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TEMPLE, JOHN W
 2300 NW CORPORATE
 S238
 BOCA RATON, FL 33431

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	TEMPLE, JOHN W
STREET ADDRESS	2300 NW CORPORATE BLVD S238
CITY - ST - ZIP	BOCA RATON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 05/05/06-80055-003 150.00

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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 607, 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: John W Temple President 4-20-06 541-597-8841
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #