

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01065

**Entity Name:** EBON TEMPLE, INC.

**Current Principal Place of Business:**

7001 WALLACE ROAD  
ORLANDO, FL 32819

**Current Mailing Address:**

7001 WALLACE ROAD  
ORLANDO, FL 32819 US

**FEI Number:** 59-2368131

**Certificate of Status Desired:** Yes

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

REGISTERED AGENT SERVICES CO.  
3211 VINELAND RD  
SUITE 174  
KISSIMMEE, FL 34746 US

*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:** MICHAEL ANGELO REP. FL REGISTERED AGENT

04/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPVST  
Name LEE, THOMAS S. JR.  
Address 7001 WALLACE ROAD  
City-State-Zip: ORLANDO FL 32819

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

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

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

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

Title DT  
Name LEE, THOMAS S. SR.  
Address 7001 WALLACE ROAD  
City-State-Zip: ORLANDO FL 32819

*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:** ANNIE F. BROWN

**TREASURER**

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date