

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2007 08:00 AM
Secretary of State

DOCUMENT # 482347

1. Entity Name
TEMPLE GROVE, INC.



Principal Place of Business Mailing Address
145 LINCOLN AVENUE 2002 Temple Gr 145 LINCOLN AVENUE 2002 Temple Grove
WINTER PARK, FL 32789 WINTER PARK, FL 32789



01092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1631541

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

TRISMEN, RICHARD F.
213 W COMSTOCK AVENUE
WINTER PARK, FL 32789

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROGERS, JOHN H
STREET ADDRESS	1002 TEMPLE GROVE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	VPD
NAME	LACEY, ELIZABETH LYN
STREET ADDRESS	630 S MAITLAND AVE
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	SD
NAME	TRISMEN, RICHARD F.
STREET ADDRESS	213 W. COMSTOCK AVENUE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	TD
NAME	ROGERS, PEGGY A
STREET ADDRESS	1002 TEMPLE GROVE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/12/07-80032-002 150.00

**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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with another I am empowered.

SIGNATURE:

John H. Rogers, President 1/10/2007 407-644-8396

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #