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FILED
May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 642796 (7)

1. Corporation Name

TEMPLETON INVESTMENT COUNSEL, INC.

Principal Place of Business

500 E. BROWARD BLVD.
BROWARD FINANCIAL CENTRE #2100
FT. LAUDERDALE FL 33394-3091

Mailing Address

ATTN: ROBIN C. CRAIG
P.O. BOX 11396
FT. LAUDERDALE FL 33302

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1979

4. FEI Number

59-1961621

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26 500 E. Broward Blvd.

Suite, Apt. #, etc. Attn: Legal Dept.

27 Suite 2100

City & State

28 Fort Lauderdale, FL

Zip

Country

29 33394-3091

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE

C
NAME JOHNSON, CHARLES E.
STREET ADDRESS 500 EAST BROWARD BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

DV
NAME FLANAGAN, MARTIN L.
STREET ADDRESS 500 EAST BROWARD BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

PD
NAME REED, DONALD F
STREET ADDRESS 500 EAST BROWARD BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

VS
NAME KNOBLOCK, ELIZABETH M.
STREET ADDRESS 500 EAST BROWARD BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

DV
NAME MCGOWAN, GREGORY
STREET ADDRESS 500 EAST BROWARD BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

DV
NAME MOTYL, GARY P
STREET ADDRESS 500 EAST BROWARD BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Donald F. Reed, Pres. & Director

4/22/98 954-527-7500

CR2E034 (10/97)