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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715313

1. Corporation Name
EGYPT TEMPLE HOLDING CORPORATION, INC.

Principal Place of Business	Mailing Address
4050 DANA SHORES DR TAMPA FL 33634 US	P.O. BOX 22805 TAMPA FL 33622 US

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 09/27/1968
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1236183 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

FISCHER, JIMMY
3315 HENDERSON BLVD.
TAMPA FL 33609-2913

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VTR	☐ DELETE	1.1 TITLE	VTR	☒ Change ☐ Addition
NAME	BRWON, WILLIAM D		1.2 NAME	BROWN, WILLIAM D	
STREET ADDRESS	9829 MORRIS BRIDGE RD		1.3 STREET ADDRESS	9829 MORRIS BRIDGE RD.	
CITY-ST-ZIP	TAMPA FL 33637		1.4 CITY-ST-ZIP	TAMPA, FLORIDA 33637	
TITLE	TTR	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DUGGAN, WILLIAM F		2.2 NAME		
STREET ADDRESS	5827 IMPERIAL KEY		2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33615		2.4 CITY-ST-ZIP		
TITLE	STR	☐ DELETE	3.1 TITLE	STR	☒ Change ☐ Addition
NAME	KORTE, JACOB		3.2 NAME	KORTE, JACOB	
STREET ADDRESS	13898 MARTINIQUE DR.		3.3 STREET ADDRESS	12151 76th St. N.	
CITY-ST-ZIP	SEMINOLE FL 34646		3.4 CITY-ST-ZIP	LARGO, FLORIDA 33773	
TITLE	VTR	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MASSEY, JOHN A		4.2 NAME		
STREET ADDRESS	5321 LAKE LECLARE RD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	LUTZ FL 33549		4.4 CITY-ST-ZIP		
TITLE	PTR	☒ DELETE	5.1 TITLE	VTR	☐ Change ☒ Addition
NAME	MONGIOVI, FRANK A		5.2 NAME	RICHARD JACKSON	
STREET ADDRESS	2715 WOODLAWN AVE		5.3 STREET ADDRESS	1514 RIVERSIDE DR.	
CITY-ST-ZIP	TAMPA FL 33607		5.4 CITY-ST-ZIP	TARPON SPRINGS, FLORIDA 34689	
TITLE	VTR	☐ DELETE	6.1 TITLE	PTR	☒ Change ☐ Addition
NAME	BIDOUL, EDMOND L		6.2 NAME	BIDOUL, EDMOND L.	
STREET ADDRESS	4217 EMPIRE PLACE		6.3 STREET ADDRESS	4217 EMPIRE PLACE	
CITY-ST-ZIP	TAMPA FL 33610		6.4 CITY-ST-ZIP	TAMPA, FLORIDA 33610	

CR2E037 (11/98)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3/10/99 8138348381
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #