2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000000158

P.O. BOX 2066

DECATUR, AL 35602

Address: City-St-Zip:

FILED Oct 27, 2005 Secretary of State

| Entity Nai | me: TEMPLE, | , INC. | | | |
|---|---|---|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| | JNTER FLAT BEACH, FL 3 | 32174 | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| P.O. BOX DECATUR | 2066 R, AL 35602 | | | | |
| FEI Number | : 63-0573758 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 20 FOXHL |), SHELDON JNTER FLAT BEACH, FL 3 | 2174 US | | | |
| | named entity s e of Florida. | submits this statement for the | e purpose of changing its registere | d office or registered agent, or both, | |
| SIGNATUR | RE: SHELDO | N PAFFORD | | | |
| Electronic Signature of Registered Agent | | | gent | Date | |
| | | 3(2)(b), F.S., the corporation did g Trust Fund Contribution (). | not receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () TEMPLE, BLAK P.O. BOX 2066 DECATUR, AL | 5 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VT () TEMPLE, BLAII P.O. BOX 2066 DECATUR, AL | 3 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | S () GRIFFIN, DAVI |) Delete D | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANNIE CHRISTINE HALL **TREA** 10/27/2005