

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2007 8:00 am
Secretary of State

07-30-2007 90065 007 ***550.00

DOCUMENT # F06000001398

1. Entity Name
FRANKLIN THEATER DESIGNS, INC.



Principal Place of Business
**208 INDUSTRIAL DRIVE
RIDGELAND, MS 39157-2704**

Mailing Address
**208 INDUSTRIAL DRIVE
RIDGELAND, MS 39157-2704**

60053894



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07102007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

64-0842456

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRANKLIN, PAM
~~906 WATERSIDE DRIVE~~ 52 Riley Road
CELEBRATION, FL ~~34741~~ 34747

Name **Franklin, Pam**
Street Address (P.O. Box Number is Not Acceptable)
52 Riley Road

City **Celebration** FL Zip Code **34747**

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 *Patricia Franklin*

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

(NOTE: Registered Agent signature required when resigning)

7/26/07

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FRANKLIN, ROBERT R 906 WATERSIDE DR. CELEBRATION, FL 34741 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S FRANKLIN, PATRICIA 906 WATERSIDE DR. CELEBRATION, FL 34741 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 52 Riley Road Celebration, FL 34747 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 52 Riley Road Celebration, FL 34747 |
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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 all other like empowered

SIGNATURE: *Patricia Franklin*

7/26/07