

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
 05-07-2002 90229 048 ***158.75

DOCUMENT # F93000004309

1. Entity Name
TEMPLETON EMERGING MARKETS INCOME FUND, INC.

Principal Place of Business
**500 E. BROWARD BLVD.
 FT. LAUDERDALE FL 33394**

Mailing Address
**500 E. BROWARD BLVD.
 FT. LAUDERDALE FL 33394**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
Suite 1200

Suite, Apt. #, etc.
Suite 1200

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3192205**

Applied For

Not Applicable

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

**WEBER, LORI A
 500 E. BROWARD BLVD.
 STE 2100
 FT. LAUDERDALE FL 33394**

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite 1200

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V
 FORESTER, SAMUEL J JR.
 500 E. BROWARD BLVD.
 FT. LAUDERDALE FL** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 ASHTON, HARRIS J
 191 CLAPBOARD RIDGE
 GREENWICH CT 06830** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**500 East Broward Blvd., Suite 1200
 Ft. Lauderdale, FL 33394-3091** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**AT
 DEBELLIS, KAREN P
 100 FOUNTAIN PARKWAY
 ST. PETERSBURG FL 33716-1205** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**T
 ROSENBERG, BRUCE S
 500 EAST BROWARD BOULEVARD
 FT. LAUDERDALE FL 33394** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 HOLIDAY, EDITH E
 3239 38TH STREET, N.W.
 WASHINGTON DC 20016** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**500 East Broward Blvd., Suite 1200
 Ft. Lauderdale, FL 33394-3091** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VAS
 GOSS, DAVID P
 777 MARINERS ISLAND BLVD
 SAN MATEO CA 94404** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V/AS
 GOSS, DAVID P.
 ONE FRANKLIN PARKWAY
 SAN MATEO, CA 94403-1906** ☒ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lori A. Weber
Lori A. Weber

4/26/02 (954) 847-2283

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)