


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90083 049 ****50.00

DOCUMENT # M01000001221 1. Entity Name FRANKLIN TEMPLETON INVESTOR SERVICES, LLC					
Principal Place of Business ONE FRANKLIN PKWY. SAN MATEO, CA 94403-1906			Mailing Address ONE FRANKLIN PKWY. LEGAL SM 920/2 SAN MATEO, CA 94403-1906		
2. Principal Place of Business One Franklin Parkway		3. Mailing Address One Franklin Parkway			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. Legal SM 920/2			
City & State San Mateo, CA		City & State San Mateo, CA		4. FEI Number 94-3384566	
Zip 94403-1906		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SEIDMAN, LAURA T 500 E. BROWARD BLVD., STE. 2100 FT LAUDERDALE, FL 33394-3091				7. Name and Address of New Registered Agent Name Laura R. Seidman Street Address (P.O. Box Number is Not Acceptable) 500 E. Broward Blvd., Suite 2100 City Fort Lauderdale, FL Zip Code 33394-3091	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TEMPLETON WORLDWIDE, INC 500 E. BROWARD BLVD. SUITE 2100 FT. LAUDERDALE, FL 333943091	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Templeton Worldwide, Inc. 500 E. Broward Blvd., Suite 2100 Fort Lauderdale, FL 33394-3091	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>Barbara J. Green</i> Templeton Worldwide, Inc., Barbara J. Green, Senior Vice President & Secretary <i>April 21, 2005</i> 650-312-2000					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

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