


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 16, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # M04000003680**  
 1. Entity Name  
 FRANKLIN INVESTMENT PARTNERS, LLC



Principal Place of Business  
 67 BATTERY MARCH STREET  
 BOSTON, MA 02110

Mailing Address  
 67 BATTERY MARCH STREET  
 BOSTON, MA 02110

**DO NOT WRITE IN THIS SPACE**



03022005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-1555693	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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

**Filing Fee is \$50.00**  
**Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALEX, JAMES C 67 BATTERY MARCH STREET BOSTON, MA 02110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANDERSON, BRYAN W 67 BATTERY MARCH STREET BOSTON, MA 02110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GESNER, KONRAD JR 67 BATTERY MARCH STREET BOSTON, MA 02110
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 03/16/05-80052-011 150.00

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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: X *BH* \_\_\_\_\_ Date: 3/16/05 \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #