2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2008 DEC -8 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M86110

1. Entity Name
TEMPLETON FAMILY, INC.

07312008 Chg-P CR2E034 (12/06)

Principal Place of Business	Mailing Address
2555 COLONIAL BOULEVARD FORT MYERS, FL 33907	2555 COLONIAL BOULEVARD FORT MYERS, FL 33907

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number
65-0061441
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TRIPP, THEODORE J JR
2532 EAST FIRST STREET
FORT MYERS, FL 33901

7. Name and Address of New Registered Agent

Name

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

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. I am familiar with, and accept the obligations of registered agent.

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

Amended AR is $61.25

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	PCD TEMPLETON, WILFRED S 323 BEN FRANKLIN DRIVE SARASOTA, FL 34236	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TEMPLETON, WILFRED S 323 BEN FRANKLIN DRIVE SARASOTA, FL 34236	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD TEMPLETON, PAMELA A 2555 COLONIAL BLVD. FT. MYERS, FL 33901	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPST TEMPLETON, PAMELA A. 2555 COLONIAL BLVD. FT. MYERS, FL 33907	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TEMPLETON, C. STEPHEN PO BOX 136 ALDIE, VA 20105	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD TEMPLETON, ANN J 323 BEN FRANKLIN DRIVE SARASOTA, FL 34236	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	300138683173	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP YOXALL, ROBERT W. 2555 COLONIAL BLVD. FT. MYERS, FL 33907	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Wilfred S Templeton WILFRED S TEMPLETON 12-5-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CORPORATION SERVICE COMPANY®

ACCOUNT NO. : 072100000032

REFERENCE : 816808 4352702

AUTHORIZATION :

COST LIMIT : $ 61.25

ORDER DATE : December 8, 2008

ORDER TIME : 9:11 AM

ORDER NO. : 816808-005

CUSTOMER NO: 4352702

** AMENDED** ANNUAL REPORT FILING

NAME: TEMPLETON FAMILY, INC.

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2008 DEC -8 AM 10:45
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina Dunlap X2951

EXAMINER'S INITIALS: _____