2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006989

Entity Name: THE FRANKLIN FOUNDATION, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1106 PARK AVENUE 56 MOULTRIE VILLAGE LANE ORANGE PARK, FL 32073 ST AUGUSTINE, FL 32086

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 600077 56 MOULTRIE VILLAGE LANE SAINT JOHNS, FL 32260 ST AUGUSTINE, FL 32086

FEI Number: 26-3016397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

HUBBARD, KIM K ROBERTS, DAVID 1106 PARK AVENUE 56 MOULTRIE VILLAGE LANE ORANGE PARK, FL 32073 ST. AUGUSTINE, FL 32086 US

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: DAVID ROBERTS 04/30/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ROBERTS, DAVID F ROBERTS, DAVID F Name: Name: 1106 PARK AVENUE Address: 56 MOULTRIE VILLAGE LANE Address:

City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ST AUGUSTINE, FL 32086 US

(X) Change () Addition Title: () Delete Title: MARARDIAGO, DORN P Name: MARARDIAGO, DORN P Name: Address: Address:

1106 PARK AVENUE 56 MOULTRIE VILLAGE LANE City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ST AUGUSTINE, FL 32086 US

Title: () Delete Title: (X) Change () Addition OWEN, SUE C Name: OWEN, SUE C Name:

56 MOULTRIE VILLAGE LANE Address: 1106 PARK AVENUE Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID ROBERTS D 04/30/2009