2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000032455

City-St-Zip:

W. PALM BCH, FL 33402

FILED Feb 18, 2005 Secretary of State

Entity Nai	me: TEMPLA	R BUILDERS, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH, FL 33401				2611 OLD OKEECHOBEE RD. WEST PALM BEACH, FL 33409	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	VIEW AVENUI LM BEACH, F		2611 OLD OKEECHOB WEST PALM BEACH, F		
FEI Number	: 65-1003650	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
LARRY M. MESCHES, P.A. 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH, FL 33401 US			525 S. FLAGER DR. ŚL	LARRY M. MESCHES, P.A. 525 S. FLAGER DR. SUITE 200 WEST PALM BEACH, FL 33401 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				02/18/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (DAY, GLEN LIN 905 POPLAR I LAKE PARK, F)R	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	ELLIOTT, WAL	ECHOBEE RD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	COFFIN, WINE) Delete SSOR D	Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: WALTER J. ELLIOTT VΡ 02/18/2005