## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # P03000052537**

1. Entity Name

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

FRANKLIN LANDMARK INVESTMENTS, INC.



Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

1101 NORTH CONGRESS AVENUE, SUITE 202 **BOYNTON BEACH, FL 33426** 

1101 NORTH CONGRESS AVENUE, SUITE 202 BOYNTON BEACH, FL 33426

## **FILED** Apr 17, 2006 8:00 am Secretary of State

04-17-2006 90375 024 \*\*\*150.00

40051103



04132006

No Chg-P

CR2E034 (11/05)

4. FEI Number 83-0356945

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

TOLER, DONALD F 1101 NORTH CONGRESS AVENUE, SUITE 202 BOYNTON BEACH, FL 33426

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registered office	or registered a	gent, or both, in the State of Flo	rida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title i	f applicable. (NOTE: Registered Agent sig	nature required when	reinstating)	DATE
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 Added to	May Be Fees	
10.	OFFICERS AND DIRECTORS				
TITLE	PRES	•			
NAME	TOLER, DONALD F				
STREET ADDRESS	9058 CAVATINA PLACE				
CITY-ST-ZIP	BOYNTON BEACH, FL 33437				
TITLE	V.P.				
NAME	TOLER, HEATHER M				
STREET ADDRESS	9058 CAVATINA PLACE				
CITY-ST-ZIP	BOYNTON BEACH, FL 33437		•		
TITLE					
NAME					
STREET ADDRESS				DO NOT W	DITE
CITY-ST-ZIP				DO NOT W	KIIE
TITLE				IN THIS OF	
NAME		1		IN THIS SP	ACE
STREET ADDRESS					
CITY-ST-ZIP		•			

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 all other like empowered.

TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06 571-369-0088 Date Dayling Phone #