


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90035 034 ***158.75

DOCUMENT # P06000153920 1. Entity Name FRANKLIN GROUP OF NW FLORIDA INC.			
Principal Place of Business 2910 INVERNESS PLACE PENSACOLA, FL 32503 US		Mailing Address 2910 INVERNESS PLACE PENSACOLA, FL 32503 US	
2. Principal Place of Business - No P.O. Box # 2325 W. Cervantes St.		3. Mailing Address 2325 W. Cervantes St.	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Pensacola, Florida		City & State Pensacola, Florida	
Zip 32505		Zip 32505	
Country USA		Country USA	
4. FEI Number 06-1651478		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SEGERS, ERNEST E PRES 2910 INVERNESS PLACE PENSACOLA, FL 32503		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 <u><i>Ernest E. Segers</i></u> DATE <u>03.10.08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PRES SEGERS, ERNEST E PRES 2910 INVERNESS PLACE PENSACOLA, FL 32503 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SEGERS, CHRISTINE S VP 2910 INVERNESS PLACE PENSACOLA, FL 32503 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u><i>Ernest E. Segers</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>03.10.08</u> Daytime Phone # <u>(850) 438-4264</u>	