2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P12763

1. Entity Name

FRANKLIN ASSOCIATES, ATCHITECTS, INC.



FILED Jan 31, 2006 08:00 A **Secretary of State**

Principal Place of Business

142 N. MARKET STREET

P.O. BOX 4048 CHATTANOOGA, TN 37405-0048 Mailing Address

142 N. MARKET STREET

P.O. BOX 4048

CHATTANOOGA, TN 37405-0048



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No Chg-P CR2E034 (11/05) 01262006

4. FEI Number 62-0679391 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

LYLE, MITZI 11839 LORETTO WOODS CT JAX, FL 33323

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3. 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 relinstating)

FILE NOWI!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000408485 02/08/06-80062-004 150.00

OFFICERS AND DIRECTORS 10. SD TITLE HILBERT, GARY B. NAME 2519 CEDARTON COURT STREET ADDRESS CITY-ST-ZIP CHATTANOOGA, TN 37421 TD NAME BROWN, HARRY J. JR. 6338 OLD DAYTON PIKE STREET ADDRESS HIXSON, TN CITY-ST-ZIP RRFFRANKLIN, ROBERT A. 142 N. MARKET ST. STREET ADDRESS CITY-ST-ZIP CHATTANOOGA, TN ከከ ደ FISHER, JR. E.J. STREET ADDRESS 602 SPRING LAKE CT CITY-ST-ZIP CHATTNOOGA, TN MAE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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.

NONATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harry J. Brown Jr.

Treasurer