

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 02 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000059044 (4)

1. Corporation Name

TEMPLETON LEASING CORPORATION



Principal Place of Business 3590 NW 54TH STREET STE 6 FORT LAUDERDALE FL 33309	Mailing Address 3590 NW 54TH STREET STE 6 FORT LAUDERDALE FL 33309
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3590 NW 54 St Suite, Apt. #, etc. 22 SUITE 9 City & State 23 FT LAUDERDALE FL Zip 24 33309		2a. Mailing Address 26 3590 NW 54 St Suite, Apt. #, etc. 27 SUITE 9 City & State 28 FT LAUDERDALE FL Zip 29 33309		3. Date Incorporated or Qualified 07/25/1995	
Country 25 US		Country 30 US		4. FEI Number 65-0597031	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent MCCARTNEY, SHARI L 600 S. ANDREWS AVE. STE 503 FT. LAUDERDALE FL 33301				10. Name and Address of New Registered Agent 81 Name MCCARTNEY, JAMES I. 82 Street Address (P.O. Box Number is Not Acceptable) 3590 NW 54 ST 83 STE 9 84 City FT LAUDERDALE FL 85 Zip Code 33309			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*James I. McCartney* JAMES I. MCCARTNEY PRES. 1/8/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	MCCARTNEY, SHARI L	600 S. ANDREWS AVE. STE 503	FT. LAUDERDALE FL 33301				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	MCCARTNEY, JAMES I	3590 NW 54TH STREET STE 6	FORT LAUDERDALE FL 33309				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	MCCARTNEY, MICHELLE	3590 NW 54TH STREET STE 6	FORT LAUDERDALE FL 33309				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James I. McCartney* JAMES I. MCCARTNEY PRES. 9/4/95 954 753 8105

CR2E034 (10/97)