


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 10, 2006 8:00 am
Secretary of State

05-10-2006 90105 050 ***150.00

DOCUMENT # S97415 1. Entity Name TEMPLE TERRACE PROPERTIES, INC.	
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60038051



04282006 No Chg-P CR2E034 (11/05)

4. FEI Number 52-2376758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WALSTEAD, DONALD 8408 TEMPLE TERRACE HWY. TEMPLE TERRACE, FL 33637

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! 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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WALSTEAD, DONALD 8408 TEMPLE TERRACE HWY. TEMPLE TERRACE, FL 33637
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IN THIS SPACE**

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: *Paula...*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06 813 989 9663
Date Daytime Phone #