## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000086212

1. Entity Name
ALLEN PUBLISHING, INC.



FILED Mar 17, 2004 08:00 AM Secretary of State

Principal Place of Business 4630 S. KIRKMAN ROAD, #440

ORLANDO, FL 32811

Mailing Address

4630 S. KIRKMAN ROAD, #440 ORLANDO, FL 32811



## DO NOT WRITE IN THIS SPACE

02232004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For 04-3708395 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FENNER, ALLEN C 4630 S. KIRKMAN ROAD, #440 ORLANDO, FL 32811

SIGNATURE: .

## DO NOT WRITE IN THIS SPACE

the congainons of registered agent.					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered			Agent eignature i	equired when reinstating)	DATE
		Election Campaign Financ Trust Fund Contribution.	cin <b>ç</b>	\$5.00 May Be Added to Fees	U00000090345 03/17/04-80015-004 150.00
10. OFFICERS AND DIRECTORS					
TIPLE NAME STREET ADDRESS CITY-ST-ZP	D FENNER, ALLEN C 7862 ST. ANDREWS CIRCLE ORLANDO, FL 32835				
TRILE NAME STREET ADDRESS CITY-ST-ZIP	D FENNER, LINDA R 7862 ST. ANDREWS CIRCLE ORLANDO, FL 32835				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-51-ZP				IN '	THIS SPACE
THEE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.					

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