2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006
Secretary of State

DOCUMENT# N97000004734

Entity Name: ALLEN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

2400 S FEDERAL HWY., STE 200
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

2400 S FEDERAL HWY., STE 200
STUART, FL 34994

New Mailing Address:

FEI Number: 65-0783002 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLEN, R.E.
2400 S FEDERAL HWY
SUITE 200
STUART, FL 349944531 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: ALLEN, R.E.
Address: 2400 S FEDERAL HWY., STE 200
City-St-Zip: STUART, FL 34994

Title: D ( ) Delete
Name: ALLEN, RICHARD S
Address: 5916 W ELOWIN DR
City-St-Zip: VISALIA, CA 93291

Title: T/D ( ) Delete
Name: ALLEN, REX
Address: 1200 PREMIER DRIVE
City-St-Zip: CHATTANOOGA, TN 374213729

Title: S/D ( ) Delete
Name: ALLEN, KAREN
Address: 2150 SE GULFVIEW LANE
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T/D (X) Change ( ) Addition
Name: ALLEN, REX
Address: 1200 PREMIER DRIVE, SUITE 100
City-St-Zip: CHATTANOOGA, TN 37421 37

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R.E. ALLEN P/D 02/09/2006

Electronic Signature of Signing Officer or Director — Date