2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002831

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

WINDERMERE, FL 34786

MOORESVILLE, NC 28115

ALLEN, KENNETH E

113 ALMOND RD.

() Delete

FILED Feb 05, 2007 Secretary of State

Entity Name: THE ALLEN FUND, INC. **Current Principal Place of Business: New Principal Place of Business:** 11124 CONISTON WAY WINDERMERE, FL 34786 **Current Mailing Address: New Mailing Address:** 11124 CONISTON WAY WINDERMERE, FL 34786 FEI Number: 65-0835828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLEN, EDWARD R 11124 CONISTON WAY WINDERMERE, FL 34786 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DTS () Change () Addition () Delete ALLEN, EDWARD R Name: Name: Address: 11124 CONISTON WAY Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ALLEN, JOHN K Name: Address: 11330 WINSTON WILLOW CT Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: DP () Delete Title: () Change () Addition ALLEN, SUZANNE Y Name: Name: 11124 CONISTON WAY Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD R. ALLEN SECY 02/05/2007

() Change () Addition