

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003806

FILED
Mar 05, 2004
Secretary of State**Entity Name:** ALLEN FAMILY AND COMMUNITY SERVICES, INC.**Current Principal Place of Business:**1522 W. WASHINGTON STREET
ORLANDO, FL 32805**New Principal Place of Business:****Current Mailing Address:**1522 W. WASHINGTON STREET
ORLANDO, FL 32805**New Mailing Address:****FEI Number:** 59-3539631**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHAMPION, GEORGE SR.
1522 W. WASHINGTON STREET
ORLANDO, FL 32805 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: D () Delete
Name: CHAMPION, GEORGE L SR
Address: 1522 W. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: CHAMPION, BETTIE
Address: 1522 W. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: ANDERSON, GRANDVILLE
Address: 1522 W. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: GLOVER, GILLARD S
Address: 16 VILLAGE CIRCLE
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: PENNINGTON, LEENETTE
Address: 252 SALDON LANE
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: WADE, JAMES
Address: 1109 EMERSON STREET
City-St-Zip: EVANSTON, IL 60201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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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 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 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: GEORGE L CHAMPION, SR

D

03/05/2004

Electronic Signature of Signing Officer or Director

Date