## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000111772

Entity Name: ALLMON FAMILY ENTERPRISES, INC.

**FILED** Mar 03, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9400 S TROPICAL TRAIL 301 SURF DR

MERRITT ISLAND, FL 32952 CAPE CANAVERAL, FL 32920 UN

**Current Mailing Address: New Mailing Address:** 

P O BOX 1626 CAPE CANAVERAL, FL 32920

FEI Number: 59-3689154 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:

ASARCH, STEVEN J 20283 STATE RD 7 SUITE 400 BOCA RATON, FL 33498 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

Title:

ALLMON, CAROLYN M Name:

301 SURF DR Address:

City-St-Zip: CAPE CANAVERAL, FL 32920 UN

Title: **DVPS** 

CAMPBELL, BARBARA A Name: 9400 S TROPICAL TRL Address: City-St-Zip:

MERRITT ISLAND, FL 32952 UN

Title: DVPT

CAMPBELL, LINDEN S Name: 9400 S TROPICAL TRL Address: City-St-Zip: MERRITT ISLAND, FL 32952 UN

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA A. CAMPBELL **DVPS** 03/03/2012