

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90023 001 ***150.00

DOCUMENT # P01000021967

1. Entity Name
ALLEN & COMPANY FINANCIAL CORPORATION



Principal Place of Business
**1401 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803**

Mailing Address
**1401 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803**

40010200



01222008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3716218

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ALLEN, RALPH C
1401 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803**

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ALLEN, RALPH C
STREET ADDRESS	1401 SOUTH FLORIDA AVENUE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	DVP
NAME	RUMPH, WILLIAM E III
STREET ADDRESS	1401 SOUTH FLORIDA AVENUE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	D
NAME	MCHUGH, SCOTT
STREET ADDRESS	1401 SOUTH FLORIDA AVENUE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	D
NAME	ALBRITTON, KEITH
STREET ADDRESS	1401 SOUTH FLORIDA AVENUE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	DST
NAME	HAWLEY, LAURA J
STREET ADDRESS	1401 SOUTH FLORIDA AVENUE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	D
NAME	HOUGHTON, VIRGINIA A
STREET ADDRESS	1401 SOUTH FLORIDA AVENUE
CITY-ST-ZIP	LAKELAND, FL 33803

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: _____

Ralph C. Allen

01/22/2008

863-688-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #