2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000021967

Entity Name: ALLEN & COMPANY FINANCIAL CORPORATION

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Business:			New Pri	New Principal Place of Business:		
	- TH FLORIDA A					
Current Mailing Address:			New Ma	New Mailing Address:		
1401 SOUTH FLORIDA AVENUE LAKELAND, FL 33803						
FEI Number:	59-3716218	FEI Number Applied For()	FEI Number Not A	pplicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
	H FLORIDA A	VENUE US	1401 SC	RALPH C DP DUTH FLORIDA A ND, FL 33803	AVENUE US	
The above in the State		ubmits this statement for the pur	pose of changin	ig its registered o	office or registered agent, or both,	
SIGNATUR	E: RALPH C	ALLEN			01/06/2009	
	Electroni	c Signature of Registered Agent			Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ALLEN, RALPH	ORIDA AVENUE	Title: Name: Address: City-St-Zi _l	`) Change ()Addition	
Title: Name: Address: City-St-Zip:	RUMPH, WILLIA	ORIDA AVENUE	Title: Name: Address: City-St-Zip) Change ()Addition	
Title: Name: Address: City-St-Zip:	MCHUGH, SCOT	ORIDA AVENUE	Title: Name: Address: City-St-Zip) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () ALBRITTON, KE 1401 SOUTH FL LAKELAND, FL	ITH ORIDA AVENUE	Title: Name: Address: City-St-Zip	`) Change ()Addition	
Title: Name: Address: City-St-Zip:	HAWLEY, LAUR	ORIDA AVENUE	Title: Name: Address: City-St-Zi _l	,) Change ()Addition	
Title: Name: Address: City-St-Zip:	HOUGHTON, VI	ORIDA AVENUE	Title: Name: Address: City-St-Zip	`) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH C. ALLEN DP 01/06/2009