

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000021977					
1. Entity Name ALLEN & COMPANY INVESTMENT CORPORATION					
Principal Place of Business 1401 SOUTH FLORIDA AVENUE LAKELAND, FL 33803			Mailing Address 1401 SOUTH FLORIDA AVENUE LAKELAND, FL 33803		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02282006 Chg-P CR2E034 (11/05)	
City & State		City & State		4. FEI Number 59-3716193	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALLEN, RALPH C 1401 SOUTH FLORIDA AVENUE LAKELAND, FL 33803			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ALLEN, RALPH C 1401 SOUTH FLORIDA AVENUE LAKELAND, FL 33803	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RUMPH, WILLIAM E 1401 S FLORIDA AVENUE LAKELAND, FL 33803	☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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 Allen, Pres. 4/10/2006 863-688-9000		