

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000005911

Entity Name: ALLEN CONTRACTING, INC.

FILED  
Feb 06, 2006  
Secretary of State

## Current Principal Place of Business:

1085 FRUIT COVE RD  
JACKSONVILLE, FL 32259

## New Principal Place of Business:

742 COMMUNITY RD  
JACKSONVILLE, FL 32259

## Current Mailing Address:

1085 FRUIT COVE RD  
JACKSONVILLE, FL 32259

## New Mailing Address:

742 COMMUNITY RD  
JACKSONVILLE, FL 32259

FEI Number: 20-0591120

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLEN, BENNIE J  
1085 FRUIT COVE RD  
JACKSONVILLE, FL 32259 US

## Name and Address of New Registered Agent:

ALLEN, BENNIE J  
742 COMMUNITY RD  
JACKSONVILLE, FL 32259 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:

02/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ALLEN, BENNIE J  
Address: 1085 FRUIT COVE RD  
City-St-Zip: JACKSONVILLE, FL 32259

Title: ST ( ) Delete  
Name: ALLEN, AMY R  
Address: 1085 FRUIT COVE RD  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ALLEN, BENNIE J  
Address: 742 COMMUNITY RD  
City-St-Zip: JACKSONVILLE, FL 32259

Title: ST (X) Change ( ) Addition  
Name: ALLEN, AMY R  
Address: 742 COMMUNITY RD  
City-St-Zip: JACKSONVILLE, FL 32259

I hereby certify that the information supplied with this filing does not qualify for the 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: AMY R ALLEN

ST

02/06/2006

Electronic Signature of Signing Officer or Director

Date