2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P37103

1. Entity Name

ALLEN INDUSTRIES OF NORTH CAROLINA, INC.



FILED
Jul 11, 2006 08:00 AN
Secretary of State

Principal Place of Business

11351 49TH STREET NORTH CLEARWATER, FL 33762 US Mailing Address

11351 49TH STREET NORTH CLEARWATER, FL 33762 US



DO NOT WRITE IN THIS SPACE

07072006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-0486250

Applied For Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional

6. Name and Address of Current Registered Agent

ALLEN, DAVID W 11351 49TH ST., NORTH CLEARWATER, FL 34622

DO NOT WRITE

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 it applicable , , (NOTE. Registere	d Agent signature required when reinstating)	U00000569464 07/11/06-80028-011 158.75 ; pent signature required when reinstating)	
3.5 (1 m T) (4	The first interest in the second section of the second section in the second section is a second section in	The same was a super section of the same o		
	LE NOWIII FEE IS \$150.00 ue by September 6, 2006 9. Election Campaign Finar Trust Fund Contribution.		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. ,	OFFICERS AND DIRECTORS	[] 基础 多数 BERT (1) 等等的 (1)	· 安告》"唐史是是明明,司马奎是那样表为事的更是感题。"	
NAME STREET ADDRESS CITY-ST-ZIP	DP ALLEN, THOMAS L. 6434 BURNT POPLAR RD. GREENSBORO, NC			
TITLE . NAME STREET ADDRESS CITY-ST-ZIP	DTVP ALLEN, JOHN H. 6434 BURNT POPLAR RD GREENSBORO, NC			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALLEN, JAMES C. 6434 BURNT POPLAR RD. GREENSBORO, NC	DO	NOT WRITE	
THTLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP ALLEN, DAVID WAYNE 11351 49TH ST NO CLEARWATER, FL		THIS SPACE	
TITLE NAME STREET ADDRESS	D ALLEN, BETTY B. 6434 BURNT POPLAR RD.			

12. I hereby certify that the information supplied with this filling 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:

TITLE ____

GREENSBORO, NC

July Exec U.P.

7/7/06

336 - 294 - 4777