

2000 UNIFORM BUSINESS REPORT (UBR)

Pg. 1 of 2

0015856

DOCUMENT # P97000002996

1. Entity Name
DAVE ALLEN & COMPANY, INC.

APPROVED
AND
FILED

00 JUL 31 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**918 ORANGE AVE.
WINTER PARK FL 32789**

Mailing Address
**918 ORANGE AVE.
WINTER PARK FL 32789**

2. Principal Place of Business
2003 Lake Howell Lane

3. Mailing Address
2003 Lake Howell Lane

Suite, Apt. #, etc.

City & State
Maitland FL

City & State
Maitland FL

Zip
32751

Country

4. FEI Number **59-3418237**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUBINO, NICHOLAS J.
159 LOOKOUT PL., STE. 101
MAITLAND FL 32751**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

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

500003354505--9
-08/11/00--01100--015
******150.00 ****150.00**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	ALLEN, DAVE	
STREET ADDRESS	918 ORANGE AVE.	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, DAVE	
STREET ADDRESS	2003 Lake Howell Lane	
CITY-ST-ZIP	Maitland FL 32751	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

M. MILLIGAN AUG 02 2000

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/00 **402-740-6553**
Date Daytime Phone #

CR2E034 (5/00)

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July 28, 2000

Michelle Milligan
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Dave Allen & Company, Inc.
Document #P9700000

SECURITY
FINANCIAL
MANAGEMENT

Dear Michelle:

Per our conversation today, please find enclosed the 2000 Uniform Business Report along with check #1968 in the amount of \$150.00. As we discussed, I mailed this Annual Report to you on April 10, 2000, along with my other Company's Annual Report, Security Financial Management. The Annual Report for Security Financial Management was filed and received by you. I have enclosed a copy of the canceled check for Security Financial Management's Annual Report. Per your request, I have also enclosed a copy of my check stub and Annual Report for Dave Allen & Company, Inc., which was filed on April 10th. Please waive the \$400.00 penalty fee since it was originally filed in April. Also, the check has not cleared the bank.

Frank S. Lovaglio, RFC
David P. Allen, CFP

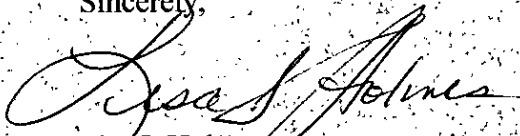
2003 Lake Howell Lane
Maitland, FL 32751

Tel. 407-644-4686
407-740-6553

Fax 407-740-5131

Thank you for your assistance in this matter and if you have any questions, please call me at 407-740-6553.

Sincerely,


Lisa I. Holmes
Office Manager

Securities offered through
ProEquities, Inc.
Post Office Box 516
Birmingham, AL 35201-0516
1-800-288-3035

Member NASD, SIPC

Security Financial Management
is independent of ProEquities