## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000020675

Entity Name: ALLEN SUPPLY, INC.

City-St-Zip:

PORT SAINT LUCIE, FL 34953

FILED Apr 02, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 907 1/2 ANGLE RD 907 1/2 ANGLE RD FORT PIERCE, FL 34949 FORT PIERCE, FL 34947 **Current Mailing Address: New Mailing Address:** PO BOX 12144 FORT PIERCE, FL 34979 FEI Number: 65-0820597 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THORNBURG, CAROL C 443 S.E. WALLACE TERRACE PORT SAINT LUCIE, FL 34983 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition THORNBURG, CAROL C CHR Name: Name: 443 SE WALLACE TERR Address: Address: City-St-Zip: PT ST. LUCIE, FL 34983 City-St-Zip: Title: Title: () Delete () Change () Addition THORNBURG, ALLEN R DIR Name: Name: 443 SE WALLACE TERR Address: Address: PT ST. LUCIE, FL 34983 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: PCOO () Change () Addition STAUNTON, LESLIE R P/COO Name: Name: 531 SW BAILEY TERR Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: Title: SEC () Delete Title: () Change () Addition STAUNTON, LOIS J SEC Name: Name: Address: 531 SW BAILEY TERR Address:

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.

City-St-Zip:

SIGNATURE: LOIS J STAUNTON SEC 04/02/2009