## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V57755

City-St-Zip: DAYTONA BEACH, FL 32119

ALLEN HEARING CENTER, INC.

FILED Jan 14, 2004 Secretary of State

Entity Nai	me: ALLEN F	HEARING CENTER, INC.			
Current P	rincipal Place	e of Business:	New Principal Place o	f Business:	
SUITE #20	LLE ROAD ) A BEACH, FL	32119			
	lailing Addre		New Mailing Address:	New Mailing Address:	
SUITE #20	LLE ROAD ) A BEACH, FL	32119			
FEI Number	: 59-3136225	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SUITE 20	ANIEL LLE ROAD A BEACH, FL	32119 US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ALLEN, DANIE 1301 BEVILLE	) Delete L RD., SUITE 20 ACH, FL 32119	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	ALLEN, CARO	) Delete L RD., SUITE 20	Title: ( Name: Address:	) Change ( ) Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAROLYN ALLEN VP 01/14/2004