



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. ID No. 001704872

2. Exact Name of the Limited Liability Company Allen & Company of Florida, LLC

3. State of Formation

State: DE

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524210

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

NON-RESIDENT INSURANCE AGENCY, FOR PROFIT

5. Principal Office Address

No. and Street: 1401 SOUTH FLORIDA AVENUE

City or Town: LAKELAND

State: FL Zip: 33803 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: CAROL ZITZELBERGER Contact Title: VICE PRESIDENT

No. and Street: 1401 SOUTH FLORIDA AVE

City or Town: LAKELAND

State: FL Zip: 33803 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	RALPH C ALLEN	1401 SOUTH FLORIDA AVENUE LAKELAND, FL 33803 USA
MANAGER	KEITH ALBRITTON	1401 SOUTH FLORIDA AVE

		LAKELAND, FL 33803 USA
MANAGER	LAURA HAWLEY	1401 SOUTH FLORIDA AVE LAKELAND, FL 33803 USA
MANAGER	JEREMY HOLLY	1401 SOUTH FLORIDA AVE LAKELAND, FL 33803 USA
MANAGER	REED EASTLEY	1401 SOUTH FLORIDA AVE LAKELAND, FL 33803 USA
MANAGER	MICHAEL WALKER	1401 SOUTH FLORIDA AVE LAKELAND, FL 33803 USA
MANAGER	RICHARD STEINMEIER	1401 SOUTH FLORIDA AVE LAKELAND, FL 33803 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 10 Day of August, 2021 at 11:33:40 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By RICHARD STEINMEIER
Signature of Authorized Person

Form No. 632
Revised 09/07

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