

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762761

FILED
Mar 27, 2006
Secretary of State

Entity Name: ALLANS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O STACEY NORMAN
235 ALLAN LN.
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

C/O STACEY NORMAN
235 ALLAN LN.
MELBOURNE BEACH, FL 32951

New Mailing Address:

FEI Number: 59-2513974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATTWOOD, ROBERT W ESQ
1686 W. HIBISCUS BLVD.
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FRENCH, ALAN
Address: 265 ALLAN LANE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D () Delete
Name: FOOTE, ROBERT
Address: 225 ALLAN LANE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D () Delete
Name: KUBLIN, VINCENT
Address: 155 ALLAN LANE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: P () Delete
Name: NORMAN, STACEY
Address: 235 ALLAN LANE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: S () Delete
Name: FINLEY, MRS JOSEPH M,
Address: 3170 S HIGHWAY A1A
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: DT () Delete
Name: NORMAN, STACEY R
Address: 235 ALLAN LANE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STACEY R. NORMAN

PRES

03/27/2006

Electronic Signature of Signing Officer or Director

Date