


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90143 049 ****61.25

DOCUMENT # 762761
1. Entity Name
Allans Subdivision Homeowners Association, Inc.



80070406

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>c/o Michael Smith</u> Suite, Apt. #, etc. <u>285 Allan Lane</u> City & State <u>Melbourne Beach, FL</u> Zip <u>32951</u> Country <u>USA</u>		3. Mailing Address <u>c/o Michael Smith</u> Suite, Apt. #, etc. <u>285 Allan Lane</u> City & State <u>Melbourne Beach, FL</u> Zip <u>32951</u> Country <u>USA</u>	
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4. FEI Number <u>59-2513974</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Robert W. Wattwood, Esq.
Street Address (P.O. Box Number is Not Acceptable)
1686 W. Hibiscus Blvd
City Melbourne FL Zip Code 32901

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. I am familiar with, and accept the obligations of registered agent.

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

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Director Alan French 265 Allan Lane Melbourne Beach, FL 32951</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Director Vincent Kublin 155 Allan Lane Melbourne Beach, FL 32951</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Director Robert Foote 225 Allan Lane Melbourne Beach, FL 32951</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President Stacy Norman 235 Allan Lane Melbourne Beach, FL 32951</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Secretary Mrs. Joseph M. Finley 3170 S. Highway A1A Melbourne Beach, FL 32951</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Director and Treasurer Michael Smith 285 Allan Lane Melbourne Beach, FL 32951</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

CR2E037B (12/02)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael Smith 3/31/03 321-674-9362