

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762761

FILED
Jan 20, 2015
Secretary of State
CC9625692406

Entity Name: ALLANS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O DAVID FINLEY
3170 SOUTH HWY A1A
MELBOURNE BEACH, FL 32951

Current Mailing Address:

P.O. BOX 510292
MELBOURNE BEACH, FL 32951 US

FEI Number: 59-2513974

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCANN, JAMES P
165 ALLAN LANE
MELBOURNE BEACH, FL 32951 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: JAMES P. MCCANN

01/20/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FOOTE, ROBERT
Address 225 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name WALKER, KATHERINE
Address 255 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

Title PRESIDENT
Name FINLEY, DAVID
Address 3170 S. A1A
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name GROVER, LINDA
Address 205 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name MILLER, WILLIAM H JR.
Address 285 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

Title TREASURER
Name MCCANN, JAMES P
Address 165 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

I hereby 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 all other like empowered.

SIGNATURE: JAMES P. MCCANN

TREASURER

01/20/2015

Electronic Signature of Signing Officer/Director Detail

Date