#### **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 762761** 

Entity Name: ALLANS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

FILED
Jun 11, 2020
Secretary of State
4254556913CC

### **Current Principal Place of Business:**

C/O DAVID FINLEY PO BOX 510292

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:

FINLEY, DAVID A 115 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: DAVID A FINLEY 06/11/2020

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title DIRECTOR Title PRESIDENT, DIRECTOR

NamePARCHINSKI, BRIANNameFINLEY, DAVIDAddress215 ALLAN LANEAddress115 ALLAN LANE

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

Title TREASURER Title DIRECTOR

Name HENCH, MARTIN Name MILLER, WILLIAM H JR.

Address 255 ALLAN LANE Address 285 ALLAN LANE

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

TitleDIRECTORTitleDIRECTOR, SECRETARYNameHENCH, TATIANANameMCDONALD, JOANNAddress255 ALLAN LANEAddress145 ALLAN LANE

Address 255 ALLAN LANE Address 145 ALLAN LANE

City-State-Zip: MELBOURNE BEACH FL 32951 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: DAVID FINLEY

06/11/2020