

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762761

Entity Name: ALLANS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.**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

04/02/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PARCHINSKI, BRIAN
Address 215 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

Title PRESIDENT, DIRECTOR
Name FINLEY, DAVID
Address 115 ALLAN LANE
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 DIRECTOR
Name MCCANN, JAMES P
Address 165 ALLAN LANE
City-State-Zip: MELBOURNE BEACH FL 32951

Title TREASURER, SECRETARY
Name MCDONALD, JOANN
Address 145 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: DAVID FINLEY

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date