

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741023

FILED
Jan 18, 2010
Secretary of State

Entity Name: ALLYBY LODGE, INC.

Current Principal Place of Business:

2872 KINGS RD.
ST. AUGUSTINE, FL 32086 US

New Principal Place of Business:

Current Mailing Address:

2872 KINGS PL
ST. AUGUSTINE, FL 32086 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

THOMAS B. WHITCOMB
2872 KINGS RD.
ST. AUGUSTINE, FL 32086 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: PD
Name: KLING, WILLIAM H., JR
Address: 9430 US 1 SOUTH
City-St-Zip: ST AUGUSTINE, FL

Title: VD
Name: ROBINSON, MIKE
Address: 9460 US 1 SOUTH
City-St-Zip: ST AUGUSTINE, FL

Title: D
Name: DEGRANDE, PAT
Address: 405 LOBELIA ROAD
City-St-Zip: ST AUGUSTINE, FL

Title: TD
Name: POIRIER, CAMILLE H
Address: 100 SR 206 WEST
City-St-Zip: ST AUGUSTINE, FL

Title: SD
Name: WHITCOMB, THOMAS
Address: 2872 KINGS ROAD
City-St-Zip: ST AUGUSTINE, FL

Title: D
Name: KLING, ROBERT
Address: P.O. BOX 4045 N/A
City-St-Zip: ST AUGUSTINE, FL

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: THOMAS B. WHITCOMB

SD

01/18/2010

Electronic Signature of Signing Officer or Director

Date