

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764078

FILED  
Jan 28, 2012  
Secretary of State

**Entity Name:** NORTH SIDE ALLAN LANE, INC.

**Current Principal Place of Business:**

ALLAN LANE  
MELBOURNE BEACH, FL 32951 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 510392  
MELBOURNE BEACH, FL 32951 US

**New Mailing Address:**

**FEI Number:** 59-2221563      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LINDE, SCOTT  
180 ALLAN LANE  
MELBOURNE BEACH, FL 32951 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: T  
Name: LINDE, SCOTT  
Address: 180 ALLAN LN  
City-St-Zip: MELBOURNE BEACH, FL

Title: P  
Name: BOCK, NANCY  
Address: 3150 S AIA  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: V  
Name: BOCK, LOUIS  
Address: 3150 S AIA  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: S  
Name: FRIED, BILLY  
Address: 110 ALLAN LANE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D  
Name: MAST, JANE  
Address: 140 ALLAN LANE  
City-St-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: SCOTT LINDE

T

01/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date