

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 707114 (5)

1. Corporation Name
PALM BEACH BOWLING ASSOCIATION, INC. OF THE AMERICAN BOWLING CONGRESS



Principal Place of Business: **3951 HAVERHILL ROAD SUITE 212 WEST PALM BEACH FL 33417 US**
Mailing Address: **3951 HAVERHILL ROAD SUITE 212 WEST PALM BEACH FL 33417 US**

3. Date Incorporated or Qualified: **04/03/1964**
3a. Date of Last Report: **02/10/1995**
4. FEI Number: **23-7457070**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **21**
2a. Mailing Address: **26**
Suite, Apt. #, etc.: **22**
City & State: **27**
Zip: **24** Country: **25**
Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent
**PRYOR, GEORGE
661 CASPER AVE
WEST PALM BCH FL 33413**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: **GEORGE PRYOR SECRETOR** *George Pryor* DATE: **1-19-96**

12. OFFICERS AND DIRECTORS

TITLE	AST	<input checked="" type="checkbox"/> DELETE
NAME	KNAPP, STEPHEN N.	
STREET ADDRESS	137 CAYMAN DRIVE	
CITY-ST-ZIP	PALM SPRINGS FL	
TITLE	AST	<input type="checkbox"/> DELETE
NAME	SERTEL, GARY	
STREET ADDRESS	2319 LEWIS ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HASER, WILLIAM	
STREET ADDRESS	3565 N. MOUNTAIN DR.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	LAMB, JOHN	
STREET ADDRESS	DT TUC AWAY LANE	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	PRYOR, GEORGE	
STREET ADDRESS	661 CASPER AVE	
CITY-ST-ZIP	W PALM BCH FL	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	KRONBERGER, RICHARD	
STREET ADDRESS	103 CORTES AVE	
CITY-ST-ZIP	WEST PALM BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	P
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	V
6.3 STREET ADDRESS	GAYOSH STEUG
6.4 CITY-ST-ZIP	114 LA MANCHA AVE ROYAL PALM BEACH FL 33411

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **GARY SERTEL** *Gary SerTEL* DATE: **1-19-96** DAYTIME PHONE: **407-640-4683**

CR2E037 (12/95)