## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003007

FILED Jan 05, 2008 Secretary of State

Entity Name: PALM BEACH COUNTY BOWLING ASSOCIATION U.S.B.C. INC.

**Current Principal Place of Business: New Principal Place of Business:** 3951 HAVERHILL RD., STE. 210 WEST PALM BEACH, FL 33417 **Current Mailing Address: New Mailing Address:** 3951 HAVERHILL RD., STE. 210 WEST PALM BEACH, FL 33417 FEI Number: 20-4533074 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PRYOR, GEORGE A. JR. 661 CAŚPER AVE WEST PALM BEACH, FL 33413 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MCCLOSKY, DAVID MCCLOSKY, DAVID Name: Name: 17 VIA DEL CORSO Address: 17 VIA DEL CORSO Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33418 Title: () Delete Title: () Change () Addition LEWIS, SHERYL L. Name: Name: Address: 808 SW 5 ST. Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: Title: () Delete Title: () Change () Addition SERGEL, GARY R Name: Name: 2319 LEWIS ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: PRYOR, GEORGE A JR Name: Address: 661 CASPER AVE Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition SCHULZE, CHARLES W. SCHULZE, CHARLES W. Name: Name: 11648 PERSIMMON BLVD 11648 PERSIMMON BLVD Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY SERGEL T 01/05/2008