

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003315

FILED
Feb 27, 2009
Secretary of State

Entity Name: NORTHWEST FLORIDA BOWLING CONFERENCE, INC.

Current Principal Place of Business:

% JIM ALLERHEILIGEN
384 ECHO CIR
FT WALTON BEACH, FL 325486326

New Principal Place of Business:

% JIM ALLERHEILIGEN
384 ECHO CIR
FT WALTON BEACH, FL 325486326 US

Current Mailing Address:

% JIM ALLERHEILIGEN
384 ECHO CIR
FT WALTON BEACH, FL 325486326

New Mailing Address:

FEI Number: 59-6500046 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLERHEILIGEN, JIM
384 ECHO CIR
FT WALTON BEACH, FL 325486326 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: D () Delete
Name: GILBERT, JOHNNY
Address: 1407 VERMONT AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: DS () Delete
Name: SALE, LINDA
Address: 9109 LAKE FOREST DR
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D () Delete
Name: ALCORN, FRED JR
Address: 6832 FORSYTHE ST
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: HAWKINS, DARLENE
Address: 1497 BENJAMIN CHAIRES RD
City-St-Zip: TALLAHASSEE, FL 32317

Title: P () Delete
Name: REYNOLDS, STEVEN
Address: 504 THIRD AVE
City-St-Zip: DESTIN, FL 32541

Title: V () Delete
Name: PATTON, JIM (JIMBO)
Address: 1004 JAMIE DR
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCVAY, KEN
Address: 390 S TYNDALL PKWY
City-St-Zip: PANAMA CITY, FL 32404

Title: D (X) Change () Addition
Name: SALE, LINDA
Address: 9109 LAKE FOREST DR
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D (X) Change () Addition
Name: MCGINNES, DAVE
Address: 113 OVERVIEW DR
City-St-Zip: CRESTVIEW, FL 32539

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: REYNOLDS, STEVEN
Address: 504 THIRD AVE
City-St-Zip: DESTIN, FL 32541

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVEN REYNOLDS

V

02/27/2009

Electronic Signature of Signing Officer or Director

_____ Date