

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000003007

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

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC1915516773**

**Current Principal Place of Business:**

3951 HAVERHILL RD. N  
SUITE 210  
WEST PALM BEACH, FL 33417-8145

**Current Mailing Address:**

3951 HAVERHILL RD. N  
SUITE 210  
WEST PALM BEACH, FL 33417-8145

**FEI Number: 20-4533074**

**Certificate of Status Desired: No**

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

SERDEL, GARY R  
2319 LEWIS  
WEST PALM BEACH, FL 33415 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:** GARY SERDEL

01/25/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MCCLOSKEY, DAVID  
Address 17 VIA DEL CORSO  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name LEWIS, SHERYL L.  
Address 808 SW 5 ST.  
City-State-Zip: BOYNTON BEACH FL 33426

Title S  
Name SERDEL, GARY R  
Address 2319 LEWIS ROAD  
City-State-Zip: WEST PALM BEACH FL 33415

Title D  
Name MCGRUFF, WILLIE F  
Address 1306 LEE ST.  
City-State-Zip: DELRAY BEACH FL 33444

Title D  
Name WILLIS, NELSON JR  
Address 208 N. W. AVE K  
City-State-Zip: BELLE GLADE FL 33430-1932

*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:** GARY SERDEL

**MANAGER**

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date