2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 12, 2001 8:00 am³ Secretary of State DOCUMENT # 701864 1. Entity Name THE ST. PETERSBURG WOMAN'S BOWLING ASS'N, INC. 05-12-2001 90014 048 ****61.25 Principal Place of Business Mailing Address 8668-J PARK BLVD. 8668-J PARK BLVD. SEMINOLE FL 34647-4348 SEMINOLE FL 34647-4348 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0916382 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MADELEINE J DALRYMPLE Street Address (P.O. Box Number is Not Acceptable) 5401101 AVENUE NORTHHEALY, BETTY W. 125 - 28TH STREET, NORTH ST. PETERSBURG FL 33713 Zip Code City 33782 PINELLAS PARK 8. 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. 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. TITLE ☐ Channe ☐ Addition ☐ Delete CARVER, MARJORIE D NAME NAME STREET ADDRESS STREET ADDRESS 7880 54 AVE NORTH CITY-ST-7IP CITY-ST-ZIP SAINT PETERSBURG FL 33709 Delete 🔀 Change ☐ Addition TITLE TITLE MARYLOU SOSBEY LOIS ANDERSON NAME NAME STREET ADDRESS 2446 17 AVENUE NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ST PETERSBURG, FL 00000 D X Delete **X** Change ☐ Addition TITLE TITLE MRS. LOUISE FILL BAKER, SUZIE NAME NAME STREET ADDRESS 5241 92 TERRACE NORTH STREET ADDRESS 3530 100 PLACE NORTH CITY-ST-ZIP PINELLAS PARK, FL. 33782 CITY-ST-ZIP PINELLAS PARK FL Delete D Change ☐ Addition TITLE TITLE MS SUSAN MC KAY FISHER, MARY NAME NAME STREET ADDRESS 3300 XENIA STREET NORTH STREET ADDRESS 5701 93 AVE. N. ST. PETERSBURG, FL. 33713 CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK FL T Change Addition Delete TITLE TITLE MRS. LENI MILLER KNAPP, MARGARET E NAME NAME STREET ADDRESS 3563 100 AVENUE NORTH STREET ADDRESS 7890 OLIVER RD PINELLAS PARK, FL. 33782 CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33777 Change ☐ Addition TITLE ☐ Delete TITLE DALRYMPLE, MADELEINE J NAME NAME STREET ADDRESS STREET ADDRESS 5401 101ST AVENUE NORTH CITY-ST-7IP CITY-ST-ZIP PINELLAS PARK, FL 00000 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.