2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# 702170

Entity Name: BOWLING CENTERS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

2690 BABBITT AVE
ORLANDO, FL 32833 US

New Principal Place of Business:

Current Mailing Address:

2690 BABBITT AVE
ORLANDO, FL 32833 US

New Mailing Address:

FEI Number: 59-2359587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PAM V. LUTHER
2690 BABBITT AVE
ORLANDO, FL 32833 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: LUTHER, PAM,
Address: 2690 BABBITT
City-St-Zip: ORLANDO, FL 32833

Title: D ( ) Delete
Name: FINKELSTEIN, SANDY
Address: 600 COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D ( ) Delete
Name: CINIELLO, GARY
Address: 28351 S TAMIAMI TRAIL
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D ( ) Delete
Name: DYKES, ROBERT
Address: 1001 W OAKFIELD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: D ( ) Delete
Name: SCHUMACKER, JOE
Address: 1389 NW 135TH AVE
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: DYKES, BOB
Address: 1001 W OAKFIELD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: D (X) Change ( ) Addition
Name: HARMON, CHARLENE
Address: 800 CHENEY HIGHWAY
City-St-Zip: TITUSVILLE, FL 32780

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAM V. LUTHER D 07/01/2005

Electronic Signature of Signing Officer or Director — Date