2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702170

FILED Apr 10, 2008 Secretary of State

Entity Name: BOWLING CENTERS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 2690 BABBITT AVE 615 SIX FLAGS DR ORLANDO, FL 32833 US ARLINGTON, TX 76011 US **Current Mailing Address: New Mailing Address:** 2690 BABBITT AVE PO BOX 6361 ORLANDO, FL 32833 US ARLINGTON, TX 76005 US FEI Number: 59-2359587 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: PAM V. LUTHER JIM ZEBEHAZY 2690 BABBITT AVE 27304 PIN STRAW RD ORLANDO, FL 32833 US LEESBURG, FL 34748 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: JIM ZEBEHAZY 04/10/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LUTHER, PAM, SUPPER, BILL Name: Name: 2690 BABBITT Address: 615 SIX FLAGS DR Address: City-St-Zip: ORLANDO, FL 32833 City-St-Zip: ARLINGTON, TX 76011 Title: Title: (X) Change () Addition () Delete FINKELSTEIN, SANDY Name: STEVENSON, MATT Name: Address: 600 COURTENAY PKWY Address: 405 PATRICIA AVE City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: DUNEDIN, FL 34698 Title: () Delete Title: () Change () Addition DYKES, BOB Name: Name: 1001 W OAKFIELD DRIVE Address: Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HARMON, CHARLENE Name: 800 CHENEY HIGHWAY Address: Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: Title: () Delete Title: (X) Change () Addition PERRUNE, ANTHONY PERRONE, ANTHONY Name: Name: 6816 GALL BLVD 6816 GALL BLVD Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: ZEPHYRHILLS, FL 33541 Title: () Delete Title: () Change () Addition JOE. SCHUMACKER Name: Name: Address: 1389 NW 135TH AVE Address: SUNRISE, FL 33323 City-St-Zip: 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: BILL SUPPER D 04/10/2008