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Apr 08 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 702736 (0)

1. Corporation Name

AMERICAN LAWN BOWLING ASSOCIATION MEMORIAL FOUNDATION, INC.

Principal Place of Business

Mailing Address

2175 LARIAT LANE  
WALNUT CREEK CA 94596  
US

2175 LARIAT LANE  
WALNUT CREEK CA 94596-6514  
US



3. Date Incorporated or Qualified 07/28/1961 3a. Date of Last Report 01/29/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ESCH, HAROLD L.  
1524 LAKE SHORE DRIVE  
ORLANDO FL 32803

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE  
NAME WEBB, JOSEPH  
STREET ADDRESS 1117 EL RANCHO DRIVE  
CITY-ST-ZIP SUN CITY CENTER FL 33573

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME Douglas McArthur  
1.3 STREET ADDRESS 7185 W. Topoka  
1.4 CITY-ST-ZIP Glendale, AZ 85308

TITLE ST ☐ DELETE  
NAME OGDEN, WOODRUFF  
STREET ADDRESS 2175 LARIAT LANE  
CITY-ST-ZIP WALNUT CREEK CA 94596

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME COPELAND, JAMES  
STREET ADDRESS 570 DOUGLAS ROAD, CONDO D  
CITY-ST-ZIP RIPON WI 54971

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME TR  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME GOLDMAN, ROBIN  
STREET ADDRESS 52 PENNY LANE  
CITY-ST-ZIP BALTIMORE MD 21209

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME TR  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D ☒ DELETE  
NAME SULLIVAN, LEON  
STREET ADDRESS 3487 SOUTH WEST AVENUE  
CITY-ST-ZIP FRESNO CA 93706

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME George West  
5.3 STREET ADDRESS 1506 N. Orchard  
5.4 CITY-ST-ZIP Tacoma, WA 98406

TITLE D ☐ DELETE  
NAME ASHTON-PHILLIPS, MICHAEL  
STREET ADDRESS 1764 N. FAIRFAX AVENUE  
CITY-ST-ZIP LOS ANGELES CA 90046

6.1 TITLE ☒ Change ☐ Addition  
6.2 NAME TR  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)