

2000 UNIFORM BUSINESS REPORT (UBR)

FILED  
Jan 19, 2000 8:00 am  
Secretary of State  
01-19-2000 90106 023 \*\*\*\*61.25

DOCUMENT # 702736  
Entity Name  
AMERICAN LAWN BOWLING ASSOCIATION MEMORIAL FOUND

Principal Place of Business  
OJAI AVE  
CITY CNTR FL 33573  
Mailing Address  
703 OJAI AVE  
SUN CITY CNTR FL 33573-5108  
US

C0005628



Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

4. FEI Number  
95-3123143  
Applied For  
Not Applicable  
5. Certificate of Status Desired  
\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
PHILLIPS, JOHN L  
703 OJAI AVE  
SUN CITY CENTER FL 33573

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.  
\$5.00 May Be Added to Fees

Make Check Payable to  
Department of State

OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T	PHILLIPS, JOHN 703 OJAI AVE SUN CITY CENTER FL 33573	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T PHILLIPS, JOHN 703 OJAI AVE SUN CITY CENTER, FL 33573
T	TURMAN, RAYMOND 1954 WOLF LAUREL DR SUN CITY CNTR FL 33573	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TURMAN, RAYMOND 1954 WOLF LAUREL DR SUN CITY CENTER, FL 33573
TRST	DEGENHARDT, KENNETH P 1209 E. ROADSMEET ST MILWAUKEE WI 53212	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEGENHARDT, KENNETH P 1209 E. ROADSMEET ST MILWAUKEE WI 53212
T	SMITH, COLIN 43 ONRIDE AVE LAKE HIAWATHA NJ 07034	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, COLIN 43 ONRIDE AVE LAKE HIAWATHA NJ 07034
TR	WEST, GEORGE 1506 N ORCHARD TACOMA WA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, GEORGE 1506 N. ORCHARD TACOMA, WA
TR	ASHTON-PHILLIPS, MICHAEL 1764 N. FAIRFAX AVENUE LOS ANGELES CA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASHTON-PHILLIPS, MICHAEL 1764 N. FAIRFAX AVE LOS ANGELES, CA

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.

SIGNATURE: *John L. Phillips* JOHN L. PHILLIPS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date  
Daytime Phone # 813 634-7489

CR2E037 (9/99)