

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 14, 2005 08:00 AM
Secretary of State

DOCUMENT # 702913

1. Entity Name
**GREATER MIAMI WOMEN'S BOWLING ASSOCIATION,
INC.**



Principal Place of Business
**%7165 SW 47TH ST., BLDG. #316
MIAMI, FL 33155**

Mailing Address
**%7165 SW 47TH ST., BLDG. #316
MIAMI, FL 33155**



01112005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1113680

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JACOBS, SUE B
7165 SW 47TH ST.
BLDG. #316
MIAMI, FL 33155**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BUZZARD, MARGO
STREET ADDRESS	10930 SW 47 TERR.
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	1STV
NAME	GOLDSTEIN, SHELLEY
STREET ADDRESS	9420 SW 102 STREET
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	2NDV
NAME	FASBINDER, ANN MARIE
STREET ADDRESS	9820 SW 130 STREET
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	ST
NAME	JACOBS, SUE B
STREET ADDRESS	7165 SW 47 STREET #316
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	SAA
NAME	NEVERS, PATTY
STREET ADDRESS	14498 SW 127 COURT
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000181487
01/14/05-80049-023 61.25

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IN THIS SPACE**

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.

SIGNATURE:

SUE B. JACOBS

Sue B. Jacobs

1/11/05

Date

305-665-0788

Daytime Phone #