## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 704525**

FILED Mar 24, 2006 Secretary of State

Entity Name: GREATER MIAMI BOWLING ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7165 S W 47TH ST #316 MIAMI, FL 33155 **Current Mailing Address: New Mailing Address:** 7165 S W 47TH ST #316 MIAMI, FL 33155 FEI Number: 59-1038427 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: HARPER, HAROLD J. 7165 S W 47TH ST #316 MIAMI, FL 33155 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DILLON, JOAN Name: Name: 9352 SW 40 TER Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HARPER, HAROLD J., Name: Address: 7165 SW 47TH ST. #316 Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: () Delete Title: () Change () Addition ROBINSON, WARREN B Name: Name: 16505 FOXDEN CT Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition HARPER, STACEY Name: HARPER, STACEY Name: 9874 HAMMOCKS BLVD #108 Address: Address: 8992 SW 209 TER City-St-Zip: MIAMI, FL 33196 City-St-Zip: MIAMI, FL 33189 Title: () Delete Title: () Change () Addition SCHEMER, PHILIP Name: Name: 10221 SW 142ND ST Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SCHRADER, MICHAEL LUIS. LORA Name: Name: Address: 24 OVIEDO AVENUE Address: 2511 SW 93 CT CORAL GABLES, FL MIAMI, FL 33165 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HAROLD J HARPER ST 03/24/2006