

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 705847

1. Corporation Name  
BROWARD COUNTY BOWLING ASSOCIATION, INC.

Principal Place of Business  
7800 W OAKLAND PK BLVD  
210-D  
SUNRISE FL 33351  
US

Mailing Address  
7800 W OAKLAND PK BLVD  
210-D  
SUNRISE FL 33351  
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip

3. New Mailing Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip

Country

FILED

01 NOV -2 PM 2: 07

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



4. Date Incorporated or Qualified To Do Business in Florida  
07/02/1963

5. FEI Number  
59-0837637

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	
VPD	OLSON, KENNETH VINNY SICA	11460 NW 32 PLACE 3250 S.W. 23 CT.	FLAUBERDALE SUNRISE FL. LAUDERDALE, FL 33312
VPD	FRAGOSO, RALPH	6326 S.W. 23 ST.	MIRAMAR FL
VPD	GILLETTE, JIM	7606 SHALIMAR ST	MIRAMAR FL 33023
VPD	HOFFER, GARY	9350 NW 20 PLACE	SUNRISE FL 33322
VPD	ABRAMS, JAMES	7920 NW 8 COURT	MARGATE FL
ST	RUSSELL, HARRY ROBERT B. WASHBURN	2420 NE 62 CT. P.O. Box 936443	FT LAUDERDALE FL 33308 MARGATE FL 33095

8. Name and Address of Current Registered Agent  
RUSSELL, HARRY Robert B.  
408 N.W. 2187 ST  
WILTON MANORS FL 33311

9. Name and Address of New Registered Agent  
Name  
ROBERT B. WASHBURN  
Street Address (P.O. Box Number is Not Acceptable)  
7800 W. OAKLAND PARK BLVD  
Suite, Apt. #, Etc.  
D-210  
City  
OAKLAND PARK  
State  
FL  
Zip Code  
33351

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent  
Date 10/31/01

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: ROBERT B. WASHBURN EXEC. DIR. 10/31/01 (954) 747-3777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date  
Daytime Phone #



# **BROWARD COUNTY BOWLING ASSOCIATION**

**7800 WEST OAKLAND PARK BLVD.**

**SUITE D-210**

**SUNRISE FLORIDA 33351**

**(954) 747 - 3777**



October 31, 2001

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Fl. 32314

To Whom It May Concern,

I know that we had files the proper form when it was required with all the changes on it that were required. When I recieved the enclosed form I called and talked to an agent and they told me that a letter went out the the application was rejected due to the fact no filing was enclosed. I did not receive this letter in the mail and was shocked when I got the form enclosed. I don't know why the fee was not enclosed but it was sent along with the fee. Your consideration is appreciated.

Sincerely,

Robert Washburn  
Executive Director  
Broward County Bowling Association