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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 706595

(6)

BROWARD COUNTY, FLORIDA WOMAN'S BOWLING ASSOCIATION, INC.

ION, IN	<b>1</b> C.							
Principal Place	of Business	Mailing Address						
6289 W. SUN SUITE 256 SUNRISE FL		6289 W. SUNRISE BL SUITE 256 SUNRISE FL 33313	VD.					
OUNIGE TE SOTO		SUMMOL PL SSS1S			3. Date Incorporated or Qualified 12/26/1963			
· ·	ace of Business	2a. Mailing Address			4. FEI Number			Applied For
Cuite Ant	W	26			59-1357354			Vot Applicable
Suite, Apt. (		Suite, Apt. #, etc.		7.1	5. Certificate of Status Desired	<b>3</b>		Additional Required
City & State	3	Orty & State			Election Campaign Financing     Trust Fund Contribution			May Be d to Fees
Zip ⊒	Country	Zip	_	untry	B. This corporation has liability for in			199.032,
4	9. Name and Address of Curre	29	30			Yes 🔲		
	9. Name and Address of Curre	nt negistereo Agent		81 Name	10. Name and Address of New Re	egistered A	gent	
ODEDA.	DONNA			Name				
OBERG,				82 Street Add	lress (P.O. Box Number is Not Acceptable	e)		
6289 W SUNRISE BLVD #256 SUNRISE FL 33313				83				
SUNNISE	E FL 33313							
				84 City		FL	85 Zir	Code
11. Pursuant t	o the provisions of Sections 617.050	2 and 617.1508, Florida Statu	tes, the abo	ove-named corpor	ration submits this statement for the purp	ose of char	nging Its re	egistered office
OI TEUISTER	eu agent, or dotri, in the State of Fior	ida. Such change was authori tion 617.0503, Florida Statute	zea by the c	corporation's boa	ard of directors. I hereby accept the appoint	intment as r	egistered	agent. I am
familiar wit	n, and accept the obligations of, Sec						, ,	
ramıllar wit						//	31/4/	
Tamiliar Will SIGNATURE	An, and accept the obligations of, Sec DUNA L. OBEYL Signature, typed or printed name of registered agen			d Agent signature require	ed when reinstaling)	DATE	31/96	
SIGNATURE	Synature, typed or printed name of registered agen OFFICERS AN	it and title if applicable (N ND DIRECTORS		d Agent signature require	ed when reinstaling) ADDITIONS/CHANGES TO OFFICE		3/96 DIRECTO	RS IN 12
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