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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name 707114

(5)

PALM BEACH BOWLING ASSOCIATION, INC. OF THE AMER ICAN BOWLING CONGRESS

Sale HAMERILL ROAD SUITE 21 US	Division Agents					
SUITE 212 WEST PALM BEACH FL 33417 US  SUITE 212 2 Principal Place of Business  2 A. Mailing Activess  2 A. Fill Number  Suite April 4, etc.  2 Principal Place of Business  3 Date Incorporated or Qualified  5 Date Incorporated or Qualified Incorporated Or Date or Qualified Incorporated Date or Inc	Principal Place of Business	Mailing Address				
WEST PALM BEACH FL 33417 US US US US US 3. Date Incorporated or Outsided Od/(3) 1964 O4/(3) 1964 O4/(3			AD			
US  2. Principal Place of Business 2. Ansign Address 2. Principal Place of Business 3. Ansign Address			FL 93417			
Super Apt. 4, etc.    23			7E 33487			
Suite April 1, etc.    Suite April 1, etc.   Suite April 2, etc.		F				Applied For
City & State    27	21				23-7457070	Not Applicable
City & State    City & State	Suite, Apt. #, etc.	<u> </u>			5. Certificate of Status Desired	11 '
28   28   28   28   29   20   20   20   20   20   20   20		···				Fee Required
Zop	23	<del></del>				
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Pursuant to Pro provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above provisions unbring this statement for the purpose of changing its registered office familiar with, and accept the obligations of Portion Sections Address P.O. Blox Number is Not Acceptable)  11. Pursuant to Pro provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above prid corporation subring this statement for the purpose of changing its registered office familiar with, and accept the obligations of Portion Section Sections above of dispenses) I handly accept the approximent as registered agent. I am Statute of Sections Sections above of dispenses and sections and sections are dispenses and sections and sections and sections are dispenses and sections and sections are dispenses and sections and	-	<del></del>	Country			Added to Fees
9. Name and Address of Current Registered Agent  PRYOR, GEORGE 661 CASPER AVE WEST PALM BCH FL 33413  682 Stroct Address (P.O. Box Number is Not Acceptable)  693 The Company of the provisions of Sections 617,0502 and 617,1506, Florida Statutes, the above provisions submitted this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the or officion's board of displaying this statement for the purpose of changing its registered agent, and the provisions of Sections 617,0502, and 617,1506, Florida Statutes, the above provision submitted by the or officion's board of displaying this statement for the purpose of changing its registered agent, and the provision is a post of the provision of the provision submitted by the or officion's board of displaying this statement for the purpose of changing its registered agent. I am before provision submitted by the or officion's board of displaying this statement for the purpose of changing its registered agent. I am before the provision of the provision submitted by the or officion's board of displaying this statement for the purpose of changing its registered agent. I am before the provision submitted by the or officion's board of displaying this statement for the purpose of changing its registered agent. I am before the provision submitted agent.  12. OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  13. INTER  13. INTER  14. CITY ST. PP  14. CITY ST. PP  15. ZEP Code  15. The part of the purpose of changing its registered agent. I am before the provision submitted agent.  15. The part of	24 25	<b>—</b>				
PRYOR, GEORGE 681 CASPER AVE WEST PALM BCH FL 33413  88 City  FL 85 Zp Code  11. Pursuant to the provisions of Sections 617,0502 and 617 1508. Floridal Statutes the above set of corporation submits this statement for the purpose of charging its registered agent, or both, in the State of Floridal. Such change was authorized by the code/flori's board of depering the representation of 17,0502. Provide Statutes the above set of depering the representation of the purpose of charging its registered agent, or both, in the State of Floridal. Such change was authorized by the code/flori's board of depering the representation of 17,0502. Provide Statutes the above set of depering the representation of the purpose of charging its registered agent. I am familiar with, not open more of registered agent. I am familiar with, not open more of registered agent at the representation of 17,0502. Provide Statutes the above set of depering the representation of the purpose of charging its registered agent. I am familiar with, not open agent at the representation of the purpose of charging its registered agent. I am familiar with, not open agent at the provide agent. I am familiar with, not open agent at the representation of the purpose of charging its registered agent. I am familiar with, not open agent at the provided agent. I am familiar with a provided agent. I am familiar w	9. Name and Address of Curren	nt Registered Agent				
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NAME SINEET ADDRESS 137 CAYMAN DRIVE PALM SPRINGS FL  AST SERGEL, GARY SIRRET ADDRESS SIRRET ADR	OI / IOE IO / III	·· · · · · · · · · · · · · · · · · · ·	13.		ADMITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
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M. I do baroby cartify that the information appelled with this file is a but a discount of the control of the c	STREET ADDRESS 103 CORTES AVE			DDRESS 114	LA MANCHA AUG	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 amplyered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or one attachment with a addiser.	STREET ADDRESS 103 CORTES AVE CITY-ST-ZIP WEST PALM BEACH FL		6.3 STREET A	DDRESS //4	LA MANCHA AUG	pc 334//
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 12 or Block 13 if changed, or on an attachment with an address.	STREET ADDRESS 103 CORTES AVE WEST PALM BEACH FL  14. Independent operation that the information is upplied at	with this filing is voluntarily furn al report or supplemental ann	6.3 STREET A	DDRESS //4	LA MANCHA AUG YM PALM BEACH	

SIGNATURE: GAN SENGE

OR DIRECTOR

1-19-96 407-640-4683