

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra M. Mahony
Secretary of State
DIVISION OF CORPORATIONS

717536 FILED

DOCUMENT # 717536

1. Corporation Name

TAMPA MEN'S BOWLING ASSOCIATION, INC.

CHANGE name to
Reflect as shown
"REMOVE FROM S"

Principal Place of Business

1212 MITCHELL ST.
BRANDON FL 33511

Mailing Address

1212 MITCHELL ST.
BRANDON FL 33511

28403
OPENFIELD LOOP
Wesley Chapel FL 33543

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/07/1969

3a. Date of Last Report
02/23/1994

4. FEI Number
59-2377852

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TUCKER, RONALD W.
1212 MITCHELL ST.
BRANDON FL 33511

28403 OPENFIELD LP
Wesley Chapel, FL
33543

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83
84 City

FL 85 1/2/95

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	FLOYD, LLOYD
STREET ADDRESS	10701 AL CAPONE RD
CITY - ST - ZIP	TAMPA FL 33624
TITLE	VP
NAME	GINN, BUD
STREET ADDRESS	2508 PEMBERTON CREEK DR
CITY - ST - ZIP	SEFFNER FL 33584
TITLE	TD
NAME	GIRARD, RALPH
STREET ADDRESS	4909 OKARA RD.
CITY - ST - ZIP	TAMPA FL 33612
TITLE	SD
NAME	TUCKER, RONALD W.
STREET ADDRESS	1212 MITCHELL ST.
CITY - ST - ZIP	BRANDON FL 28403 OPENFIELD LOOP Wesley Chapel FL 33543
TITLE	VP
NAME	GARON, BOB
STREET ADDRESS	6642 WINDING OAK DR
CITY - ST - ZIP	TAMPA FL 33624
TITLE	VP
NAME	HOWETH, WAYNE
STREET ADDRESS	10807 MURRAY ST
CITY - ST - ZIP	TAMPA FL 33612

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	400001466114
1.4 CITY - ST - ZIP	-04/27/95-01021-018 *****61.25 *****61.25
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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)(b), 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 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.

SIGNATURE:

Ronald W. Tucker

2/24/95 (813) 991-4918

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone