FILED

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 21, 2003 8:00 am Secretary of State **DOCUMENT # 717536** 1. Entity Name 01-21-2003 90222 034 ****61.25 TAMPA BOWLING ASSOCIATION, INC. Principal Place of Business Mailing Address 28403 OPENFIELD LP 28403 OPENFIELD LP WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2377852 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TUCKER, RON Street Address (P.O. Box Number is Not Acceptable) 28403 OPENFIELD LP **WESLEY CHAPEL FL 33543** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **FILE NOW: FEE IS \$61.25** \$5.00 May Be Make Check Payable to Trust Fund Contribution. П Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE Delete TITLE ☐ Change ☐ Addition NAME VALE, DICK NAME STREET ADDRESS 7413 HANCOCK ST STREET ADDRESS CITY-ST-7IP RIVERVIEW FL 33569 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NEMETH, STEVE NAME NAME STREET ADDRESS 11738 N OLA STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP TD -- 🖾 Delete 🥏 🛥 TITLE: . Change WOLF, GREGORY G NAME STREET ADDRESS **4802 BRUTON ROAD** STREET ADDRESS CITY-ST-ZIP PLANT CITY FL 33565 CITY-ST-ZIP SDRA ☐ Delete TITLE ☐ Change ☐ Addition NAME TUCKER, RON NAME STREET ADDRESS 28403 OPENFIELD LOOP STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL FL 33543 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME ADKINS, BILL NAME STREET ADDRESS 11510 EAST BAY ROAD STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empower

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

GIBSONTON FL 33534

HARRIS, JOE

1316 E FLORA

TAMPA FL 33604

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

☐ Change

☐ Addition