

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759614

FILED  
Mar 26, 2006  
Secretary of State

**Entity Name:** ORLANDO YOUNG AMERICAN BOWLING ALLIANCE, INC.

**Current Principal Place of Business:**

1709 YVONNE ST  
APOPKA, FL 32712 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 4004  
APOPKA, FL 32704004 US

**New Mailing Address:**

**FEI Number:** 65-0121256

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PAXSON, GREG  
1709 YVONNE ST  
APOPKA, FL 32712 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GARRETT, J J  
Address: 10749 E COLONIAL DR  
City-St-Zip: ORLANDO, FL 32817 US

Title: VP ( ) Delete  
Name: YUKNAVAGE, LISA  
Address: 10749 E COLONIAL DR  
City-St-Zip: ORLANDO, FL 32817 US

Title: D ( ) Delete  
Name: ALLISON, CINDY  
Address: 722 CARNATION DR  
City-St-Zip: WINTER PARK, FL 32792 US

Title: ST ( ) Delete  
Name: PAXSON, GREG  
Address: 1709 YVONNE ST  
City-St-Zip: APOPKA, FL 32712 US

Title: D ( ) Delete  
Name: VOGEL, CATHY  
Address: 2401 CEDARFIELD LN  
City-St-Zip: KISSIMMEE, FL 32744 US

Title: P ( ) Delete  
Name: MYERS, HELEN  
Address: 3175 GLENWOOD ST  
City-St-Zip: WINTER PARK, FL 32792 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREG PAXSON

S/T

03/26/2006

Electronic Signature of Signing Officer or Director

Date