

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # F98000002714**

1. Entity Name  
**BOWL AMERICA INCORPORATED**



Principal Place of Business  
**6446 E DSALL ROAD  
ALEXANDRIA, VA 22312**

Mailing Address  
**PO BOX 1288  
SPRINGFIELD, VA 22151**

**DO NOT WRITE IN THIS SPACE**



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>54-0646173</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**PETREE, ROBERT G  
501 N. MAGNOLIA AVE., SUITE A  
ORLANDO, FL 32801**

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U000000790173  
01/23/08-80023-020 158.75

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	GOLDBERG, LESLIE H
STREET ADDRESS	6446 EDSALL ROAD
CITY-ST-ZIP	ALEXANDRIA, VA 22312
TITLE	VS
NAME	LEVY, A. J
STREET ADDRESS	6446 EDSALL ROAD
CITY-ST-ZIP	ALEXANDRIA, VA 22312
TITLE	VT
NAME	MACKLIN, RUTH E
STREET ADDRESS	6446 EDSALL ROAD
CITY-ST-ZIP	ALEXANDRIA, VA 22312
TITLE	D
NAME	FABIAN, MERLE
STREET ADDRESS	6446 EDSALL ROAD
CITY-ST-ZIP	ALEXANDRIA, VA 22312
TITLE	D
NAME	BRAHAM, WARREN
STREET ADDRESS	6446 EDSALL ROAD
CITY-ST-ZIP	ALEXANDRIA, VA 22312
TITLE	D
NAME	CLARK, IRVING
STREET ADDRESS	8650 HALLARD CT.
CITY-ST-ZIP	MANASSAS, VA 22110

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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 empowered.

Bowl America Inc. by:  
**SIGNATURE: Leslie H. Goldberg**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/11/08 703-941-6300

Daytime Phone