

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022657

FILED
Apr 23, 2008
Secretary of State

Entity Name: BOCA BOWLING ASSOCIATES, LLC

Current Principal Place of Business:

2146 COMMERCIAL TRAIL
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

2146 COMMERCIAL TRAIL
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 74-3166283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERT R. OLIVER, P.A.
2060 N.W. BOCA RATON BLVD.
SUITE 6
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

BERT R. OLIVER, P.A.
955 NW 17TH AVENUE
BUILDING D
DELRAY BEACH, FL 33445 US

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: BERT R. OLIVER

04/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ISAN, JERRY B
Address: 2146 COMMERCIAL TRAIL
City-St-Zip: BOCA RATON, FL 33486

Title: MGR () Delete
Name: ROSE, BURTON
Address: 2146 COMMERCIAL TRAIL
City-St-Zip: BOCA RATON, FL 33486

Title: MGR () Delete
Name: POWELL, JOHN JR
Address: 2146 COMMERCIAL TRAIL
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JERRY ISAN

MGR

04/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date