

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M74692

FILED
Apr 29, 2009
Secretary of State

Entity Name: WEST PASCO BOWLING CENTER, INC.

Current Principal Place of Business:

8631 OLD COUNTY RD 54
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

8631 OLD COUNTY RD 54
NEW PORT RICHEY, FL 34653

New Mailing Address:

FEI Number: 59-2889213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEBOE, CHARLES R.
2790 SUNSET PT RD
CLEARWATER, FL 33759 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: LANGLO, CHRIS
Address: 13337 FAUNA LANE
City-St-Zip: HUDSON, FL 34669

Title: SD () Delete
Name: LANGLO, JEFFREY
Address: 13915 RAIE AVE
City-St-Zip: HUDSON, FL 34667

Title: PD () Delete
Name: HIGHNOTE, DONALD B.
Address: 13322 LAKE GEORGE LN.
City-St-Zip: TAMPA, FL

Title: ST () Delete
Name: COTRONEO, CAROL S
Address: 1744 PERCHERON DR
City-St-Zip: NEW PORT RICHEY, FL 34655

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: ST (X) Change () Addition
Name: COTRONEO, CAROL S
Address: 1744 PERCHERON DR
City-St-Zip: NEW PORT RICHEY, FL 34655

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS LANGLO

TD

04/29/2009

Electronic Signature of Signing Officer or Director

Date