

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003738

FILED  
Jan 08, 2007  
Secretary of State

**Entity Name:** THE DAYTONA BEACH USBC BOWLING ASSOCIATION, INC.

**Current Principal Place of Business:**

432 PALM AVE  
ORMOND BEACH, FL 321743313

**New Principal Place of Business:**

**Current Mailing Address:**

432 PALM AVE  
ORMOND BEACH, FL 321743313

**New Mailing Address:**

**FEI Number:** 76-0780634

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FREHE, WALTER F  
432 PALM AVE  
ORMOND BEACH, FL 321743313 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: S ( ) Delete  
Name: FREHE, WALTER F  
Address: 432 PALM AVE  
City-St-Zip: ORMOND BEACH, FL 321743313

Title: V ( ) Delete  
Name: PROVANCHER, ROBERT L  
Address: 565 N. YONGE ST.  
City-St-Zip: ORMOND BEACH, FL 321745255

Title: P ( ) Delete  
Name: HOWARD, CHASE C  
Address: 20 OAKVIEW CIRCLE  
City-St-Zip: ORMOND BEACH, FL 321762820

Title: V ( ) Delete  
Name: NOFAL, BRYAN P  
Address: 12 SHWANEE TR.  
City-St-Zip: ORMOND BEACH, FL 321744310

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

Title: MGR (X) Change ( ) Addition  
Name: FREHE, WALTER F  
Address: 432 PALM AVE  
City-St-Zip: ORMOND BEACH, FL 321743313

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

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

Title: V (X) Change ( ) Addition  
Name: KNOWLES, CARLOS  
Address: 73 GRAY DAPPLE WAY  
City-St-Zip: ORMOND BEACH, FL 321743427 FL

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: WALTER F. FREHE

MGR

01/08/2007

Electronic Signature of Signing Officer or Director

Date