

NO6000003753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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C.L.  
1-12-15

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Palm Beach County United States Bowling Congress Women's Bowling Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N06000003753

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**April Costa**

Name of Contact Person

Firm/Company

**PO Box 540922**

Address

**Greenacres, FL 33454-0922**

City/State and Zip Code

**pbcwba@aol.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**April Costa**

Name of Contact Person

at **561 644-0929**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Palm Beach Count United States Bowling Congress Women's Bowling Association, Inc.
2. The principal office address: 3397 Pebble Beach Drive  
Lake Worth, FL 33467
3. The mailing address (if different): PO Box 540922  
Greenacres, FL 33454-0922
4. Date of incorporation/qualification: 03/29/2006 Document number: N06000003753
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Regina Stannard (deceased)

17815 Briar Patch Trail

Boca Raton, FL 33487

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

April Costa

3397 Pebble Beach Drive

P.O. Box NOT acceptable

Lake Worth, FL 33467

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

*Dawn L Wiggins*  
Signature of an officer or director

DAWN L WIGGINS, Director  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

*April Costa*  
Signature of Registered Agent

12-22-14  
Date

If signing on behalf of an entity:

April Costa

Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2F045 (03/12)

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