2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08091

TAMPA, FL 33607

FILED Mar 03, 2005 Secretary of State

Entity Name: TAMPA BAY BOWL ASSOCIATION, INC.

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| | |

4211 W BOYSCOUT BLVD 4211 W BOY SCOUT BLVD

STE 560 STE 560

TAMPA, FL 33607 TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

4211 W BOYSCOUT BLVD 4211 W BOY SCOUT BLVD STE 560

STE 560

TAMPA, FL 33607

FEI Number: 59-2643123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MCVAY, JAMES P MCVAY, JAMES P 4211 W BAY SCOUT BLVD 4211 W BOY SCOUT BLVD SUITE 560 SUITE 560

TAMPA, FL 33607 US TAMPA, FL 33607 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: 03/03/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

JOHNSON, CHUCK POLI, BRUCE Name: Name: 5121 EHRLICH RD STE 112-B Address: 4510 NETHERWOOD Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33624

Title: () Delete Title: () Change () Addition

SCHEMBER, STEVEN Name: Name: Address: 101 E. KENNEDY BLVD., SUITE 2800 Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

POLI, BRUCE Name: ROBIN, KOVALESKI Name: 4510 NETHERWOOD Address: Address: PO BOX 961 City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33601

() Delete Title: Title: () Change () Addition

Name: BIEN, TERRY Name: 1402 1-B N DALE MABRY Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip:

Title: Title: () Delete () Change () Addition

MCVAY, JAMES Name: Name: 4211 W BOY SCOUT BLVD STE 560 Address: Address: TAMPA, FL 33607 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES P MCVAY **PRES** 03/03/2005