

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08091

FILED  
Apr 06, 2006  
Secretary of State

**Entity Name:** TAMPA BAY BOWL ASSOCIATION, INC.

**Current Principal Place of Business:**

4211 W BOY SCOUT BLVD  
STE 560  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

4211 W BOY SCOUT BLVD  
STE 560  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 59-2643123

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCVAY, JAMES P  
4211 W BOY SCOUT BLVD  
SUITE 560  
TAMPA, FL 33607 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: C ( ) Delete  
Name: POLI, BRUCE  
Address: 4510 NETHERWOOD  
City-St-Zip: TAMPA, FL 33624

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

Title: D ( ) Delete  
Name: ROBIN, KOVALESKI  
Address: PO BOX 961  
City-St-Zip: TAMPA, FL 33601

Title: D ( ) Delete  
Name: BIEN, TERRY  
Address: 1402 1-B N DALE MABRY  
City-St-Zip: TAMPA, FL 33618

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

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

Title: D (X) Change ( ) Addition  
Name: POLI, BRUCE  
Address: 4510 NETHERWOOD  
City-St-Zip: TAMPA, FL 33624

Title: C (X) Change ( ) Addition  
Name: SCHEMBER, STEVEN  
Address: 101 E. KENNEDY BLVD., SUITE 2800  
City-St-Zip: TAMPA, FL 33602

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 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: JAMES P. MCVAY

P

04/06/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date