


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90036 042 ****61.25

DOCUMENT # N98000003264	
1. Entity Name SARASOTA WOMEN'S BOWLING ASSOCIATION, INC.	

Principal Place of Business 5546 34TH COURT EAST BRADENTON FL 34203	Mailing Address 5546 34TH COURT EAST BRADENTON FL 34203
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 51-0188569	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BAIER, PATRICE 5546 34TH COURT EAST BRADENTON FL 34203
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7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE DP	<input type="checkbox"/> Delete
NAME BURNHAM, KIMBERLY	
STREET ADDRESS 3415 63RD AVENUE EAST	
CITY-ST-ZIP BRADENTON FL 34203	
TITLE DS	<input type="checkbox"/> Delete
NAME BAIER, PATRICE	
STREET ADDRESS 5546 34TH COURT EAST	
CITY-ST-ZIP BRADENTON FL 34203	
TITLE DV	<input type="checkbox"/> Delete
NAME HIETT, CHARLOTTE	
STREET ADDRESS 1055 FRANCES AVE.	
CITY-ST-ZIP SARASOTA FL 34232	
TITLE DT	<input type="checkbox"/> Delete
NAME DONELSON, JUDY	
STREET ADDRESS 3511 ALOHA DRIVE	
CITY-ST-ZIP SARASOTA FL 34243	
TITLE DV	<input type="checkbox"/> Delete
NAME ROLAND, BRENDA	
STREET ADDRESS 3512 20TH STREET EAST	
CITY-ST-ZIP BRADENTON FL 34208	
TITLE D	<input type="checkbox"/> Delete
NAME DRAPER, BARBARA	
STREET ADDRESS 4953 BLISS	
CITY-ST-ZIP SARASOTA FL 34233	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HIETT, CHARLOTTE	
STREET ADDRESS 1055 FRANCES AVE	
CITY-ST-ZIP SARASOTA FL 34232	
TITLE VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BURNHAM, KIMBERLY	
STREET ADDRESS 3415 63RD AVENUE, E	
CITY-ST-ZIP BRADENTON FL 34203	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia A. Baier* **PATRICE A. BAIER** **3/8/04** **(941) 751-2416**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #