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Secretary of State

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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000006376

1. Corporation Name

NORTH BREVARD WOMEN'S BOWLING ASSOCIATION, INC.

Principal Place of Business

**660 N DIXIE AVE
TITUSVILLE FL 32796**

Mailing Address

**660 N DIXIE AVE
TITUSVILLE FL 32796**

546630 - 90006 - 48



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

11/05/1998

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-3546226

Applied For

Not Applicable

22

27

City & State

City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23

28

Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SPURGEON, LOLA
2245 ARIZONA TERR
TITUSVILLE FL 32780**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Secretary/Treasurer ☐ Change ☐ Addition
Susan Northcutt
660 N. Dixie Avenue
Titusville, FL 32796

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

President ☐ Change ☐ Addition
Lola Spurgeon
2245 Arizona Terr
Titusville, FL 32780

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Vice-Pres ☐ Change ☐ Addition
Lynn E. Butler
4480 Elliot Ave
Titusville, FL 32780

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Sgt-at-Arms ☐ Change ☐ Addition
Brenda J. Thackrey
2825 S. Washington Ave #456
Titusville, FL 32780

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Director ☐ Change ☐ Addition
Mary V. Cianfrocco
6775 Calypsa
Cocoa, FL 32927

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Director ☐ Change ☐ Addition
Arlene Esbrandt
1012 Corda Ct.
Titusville, FL 32796

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan Northcutt
Lola Spurgeon

4-24-99

4-24-99

407-269-8750

407-269-0369

Date

Daytime Phone #

CR2E037 (1/98)

5416630-90006-48
#N98000006326

Director
Jeanne Fox
3736 Militia Dr
Titusville, FL 32796

Director
Marcella M. Dean
4669 Nader Ln
Titusville, FL 32780

Director
Candice A-Ferguson
2801 Dunn St
Mims, FL 32754

Director
Fran Spratt
3456 Smith Rd
Mims, FL 32754

Director
Martha A. Ledet
4835 Pasco Ave
Titusville, FL 32780

Director
Norma J. Wright
730 Forest Rd
Titusville, FL 32780