

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90007 038 ****61.25

DOCUMENT # N99000003685

1. Entity Name
GREATER CITRUS BOWLING ASSOCIATION, INC.



Principal Place of Business
9415 NORTH STAR BLAZE DRIVE
CRYSTAL RIVER, FL 34428

Mailing Address
9415 NORTH STAR BLAZE DRIVE
CRYSTAL RIVER, FL 34428

54008013



01292004 No Chg-NP CR2E037 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BOYAJAN, LEON M II
2303 WEST HIGHWAY 44
INVERNESS, FL 34453-3809

**DO NOT WRITE
IN THIS SPACE**

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 re-registering)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
TEMPLETON, RON
9415 NORTH STAR BLAZE DRIVE
CRYSTAL RIVER, FL 34428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HACKER, BOB
9415 NORTH STAR BLAZE DRIVE
CRYSTAL RIVER, FL 34428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HOCKING, DICK
5656 EAST TANGELO LANE
INVERNESS, FL 344531027

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BAMMANN, NORMAN
21 W. HANGING MOSS CT.
BEVERLY HILLS, FL 34465

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RANDAZZO, JACK JR.
5510 S. BARCO TERRACE
INVERNESS, FL 34452

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CAPPELLERI, FRED
516 NORTH COUNTRY CLUB DRIVE
CRYSTAL RIVER, FL 34429

**DO NOT WRITE
IN THIS SPACE**

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:

Richard J. Hocking

Richard J. Hocking

2-14-04

Date

Daytime Phone #