

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000094012

FILED
Jul 06, 2006
Secretary of State

Entity Name: NORTHSHORE BOWLING CENTER, INC.

Current Principal Place of Business:

6190 NW 124TH LANE
CHIEFLAND, FL 32626

New Principal Place of Business:

Current Mailing Address:

6190 NW 124TH LANE
CHIEFLAND, FL 32626

New Mailing Address:

FEI Number: 20-3101333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEGARGEL, STEPHEN
8650 NW 172ND LANE
FANNING SPRINGS, FL 32693 US

Name and Address of New Registered Agent:

MEGARGEL, STEPHEN V
8650 NW 172ND LANE
FANNING SPRINGS, FL 32693 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: STEPHEN V. MEGARGEL

07/06/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MISS () Change (X) Addition
Name: HART, BRIANNE M
Address: 6190 NW 124TH LANE
City-St-Zip: CHIEFLAND, FL 32626 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIANNE HART

MISS

07/06/2006

Electronic Signature of Signing Officer or Director

Date