## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000066753

Entity Name: D & B BOWLING SUPPLIES INC.

FILED Jul 10, 2008 Secretary of State

Current Principal Place of Business:			I	New Principal Place of Business:	
7050 CRYSTAL DRIVE FORT MYERS, FL 33966 US				7050 CRYSTAL DRIVE FORT MYERS, FL 33907 US	
Current Mailing Address:				New Mailing Address:	
12001 HONEYSUCKLE ROAD FORT MYERS, 33966				12001 HONEYSUCKLE ROAD FORT MYERS, FL 33966	
FEI Number:	14-2001318	FEI Number Applied For ( )	FEI Numl	ber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name				Name and Address of N	lew Registered Agent:
STAERKER, WILLIAM A 12001 HONEYSUCKLE ROAD FORT MYERS, FL 33966 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					
SIGNATUR		Signature of Registered Agent	<u> </u>		 Date
Election Carr	,	2)(b), F.S., the corporation did not r Trust Fund Contribution(). ORS:		·	TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	VP () E STAERKER, DEN 12001 HONEYSU FORT MYERS, F	ICKLE ROAD	1	Title: ( ) Name: Address: City-St-Zip:	Change ()Addition
Title: Name: Address: City-St-Zip:	VP () E STAERKER, SHA 12001 HONEYSU FORT MYERS, F	ICKLE ROAD	1	Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition
Title: Name: Address: City-St-Zip:	VP () E STAERKER, AMA 7200 S.W. 8TH. A GAINSVILLE, FL	NVE.	1	Title: ( ) Name: Address: City-St-Zip:	Change ()Addition
Title: Name: Address: City-St-Zip:	VP () E STAERKER, KRIS 12001 HONEYSU FORT MYERS, F	ICKLE RD	1	Title: ( ) Name: Address: City-St-Zip:	Change ()Addition
Title: Name: Address: City-St-Zip:	DIR () E STAERKER, JEA 8933 BANYON C FORT MYERS, F	OVE DR.	1	Title: ( ) Name: Address: City-St-Zip:	Change ()Addition
Title: Name: Address: City-St-Zip:	PRES () E STAERKER, WIL 12001 HONEYSU FORT MYERS, F	ICKLE ROAD	1	Title: ( ) Name: Address: City-St-Zip:	Change ()Addition

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM A STAERKER PRES 07/10/2008