

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066753

FILED
Mar 28, 2009
Secretary of State

Entity Name: D & B BOWLING SUPPLIES INC.

Current Principal Place of Business:

7050 CRYSTAL DRIVE
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

12001 HONEYSUCKLE ROAD
FORT MYERS, FL 33966

New Mailing Address:

FEI Number: 14-2001318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAERKER, WILLIAM A
12001 HONEYSUCKLE ROAD
FORT MYERS, FL 33966 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: STAERKER, DENISE A
Address: 12001 HONEYSUCKLE ROAD
City-St-Zip: FORT MYERS, FL 33966 US

Title: VP () Delete
Name: STAERKER, SHAWN W
Address: 12001 HONEYSUCKLE ROAD
City-St-Zip: FORT MYERS, FL 33966 US

Title: VP () Delete
Name: STAERKER, AMANDA K
Address: 7200 S.W. 8TH. AVE.
City-St-Zip: GAINSVILLE, FL 32607 US

Title: VP () Delete
Name: STAERKER, KRISTIN M
Address: 12001 HONEYSUCKLE RD
City-St-Zip: FORT MYERS, FL 33966

Title: DIR () Delete
Name: STAERKER, JEAN A
Address: 8933 BANYON COVE DR.
City-St-Zip: FORT MYERS, FL 33919 US

Title: PRES () Delete
Name: STAERKER, WILLIAM A
Address: 12001 HONEYSUCKLE ROAD
City-St-Zip: FORT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

03/28/2009

Electronic Signature of Signing Officer or Director

Date