

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702170

**Entity Name:** BOWLING CENTERS ASSOCIATION OF FLORIDA, INC.**Current Principal Place of Business:**621 SIX FLAGS DR  
ARLINGTON, TX 76011**Current Mailing Address:**621 SIX FLAGS DR  
ARLINGTON, TX 76011 US**FEI Number:** 59-2359587**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURKETT, LEY  
1301 N WEST 76TH BLVD  
GAINESVILLE, FL 32606 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:** LEY BURKETT

04/01/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name NEWMAN, CHAD  
Address 621 SIX FLAGS DR  
City-State-Zip: ARLINGTON TX 76011

Title PAST PRESIDENT  
Name KRAUSS, CORY  
Address 8668 PARK BLVD. N., SUITE K  
City-State-Zip: SEMINOLE FL 33777

Title PRESIDENT  
Name BURKETT, LEY  
Address 1301 NW 76TH ST  
City-State-Zip: GAINESVILLE FL 32606

Title VP  
Name ARBOUR, CHRIS  
Address 6126 LAKE WORTH ROAD  
City-State-Zip: GREENACRES FL 33463

Title TREASURER  
Name SPRAGUE, MICHELLE  
Address 2303 NE DIXIE HWY  
City-State-Zip: JENSEN BEACH FL 34957

Title DIRECTOR AT LARGE  
Name PERRONE, ANTHONY  
Address 4847 NORTH ARMENIA AVENUE  
City-State-Zip: TAMPA FL 33603

Title DIRECTOR AT LARGE  
Name PERRY, STEVE  
Address 1221 EAST VINE STREET  
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR AT LARGE  
Name BAUMES, EVELYN  
Address 100 N FLORIDA AVE  
City-State-Zip: INVERNESS FL 34453

**Continues on page 2**

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHAD NEWMAN

EXECUTIVE DIRECTOR

04/01/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR AT LARGE  
Name HALPERN, JENNIFER  
Address 2530 ALOMA AVE  
City-State-Zip: WINTER PARK FL 32792

Title DIRECTOR AT LARGE  
Name ROWE, CORISSA  
Address 14513 GLOBAL PARKWAY  
City-State-Zip: FORT MYERS FL 33913

Title FRIENDS OF BCAF REP  
Name MATOVINA, BILL  
Address 7333 124TH AVE N  
3010  
City-State-Zip: LARGO FL 33773

Title DIRECTOR AT LARGE  
Name FARLEY, KATE  
Address 1950 CLASSIQUE LANE  
City-State-Zip: TAVARES FL 32778

Title FRIENDS OF BCAF REP  
Name DOTY , JEREMY  
Address 525 WEST LAKETON AVE  
City-State-Zip: MUSKEGON MI 49441

Title DIRECTOR AT LARGE  
Name DUCAT, CHELSEA  
Address 2010 DUNDEE ROAD  
City-State-Zip: WINTER HAVEN FL 33884