

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001122

**Entity Name:** OCALA USBC WOMEN'S BOWLING ASSOCIATION INC.

**Current Principal Place of Business:**

1001 NE 30TH AVE  
OCALA, FL 34470

**Current Mailing Address:**

1001 NE 30TH AVE  
OCALA, FL 34470

**FEI Number:** 51-0594749

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COLVIN, SUE  
1001 NE 30TH AVE  
OCALA, FL 34470 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BROADERICK, GAIL  
Address P.O. BOX 331  
City-State-Zip: ANTHONY FL 32617

Title MGR  
Name COLVIN, SUE S  
Address 1001 NE 30TH AVE  
City-State-Zip: OCALA FL 34470

*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:** SUE S. COLVIN

**ASSN MGR**

**04/15/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date