

**2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000004906

**Entity Name:** BOWLERS TO VETERANS LINK, INC.

**Current Principal Place of Business:**

11350 RANDOM HILLS RD, SUITE 800  
FAIRFAX, VA 22030

**Current Mailing Address:**

11350 RANDOM HILLS RD, SUITE 800  
FAIRFAX, VA 22030 US

**FEI Number:** 53-0211351

**Certificate of Status Desired:** No

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

BOJE, JEFFREY W  
609 CRATER LANE  
TAMPA, FL 33619 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 CP  
Name LASPINA, JOHN  
Address 625 B OCEANFRONT STREET  
City-State-Zip: LONG BEACH NY 11561-3098

Title D  
Name HALL, WALLY  
Address 507 LAKE SHORE DRIVE  
City-State-Zip: PASADENA MD 21122

Title D  
Name JOST, KAREN  
Address 1540 SUMMIT COURT SW  
City-State-Zip: TURNWATER WA 98512

Title D, T  
Name FLEATHER, LIBBI  
Address 28100 UNIVERSAL DRIVE  
City-State-Zip: WARRIN MI 48092

Title D  
Name CARANO, GLENN  
Address 2551 LAKERIDGE SHORES EAST  
City-State-Zip: RENO NV 89519

Title D  
Name KIELICH, KARL  
Address 661 PORTILLO AVENUE  
City-State-Zip: EL PASO TX 79932

Title D  
Name HAGIN, ELAINE  
Address 20444 ALMEDA STREET  
City-State-Zip: CASTRO VALLEY CA 94546

Title S  
Name HARRAR, MARY  
Address 254 BONAIR AVENUE  
City-State-Zip: HATBORO PA 19040

*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:** MARY HARRAR

**EXECUTIVE DIRECTOR**

01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date