

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 20 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # 620997 (7)

1. Corporation Name
PGA NATIONAL REALTY COMPANY



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| Principal Place of Business 1555 PALM BCH. LAKES BLVD., STE. 1100 P.O. BOX 3267 WEST PALM BEACH FL 33402 | Mailing Address 1555 PALM BCH. LAKES BLVD., STE. 1100 P.O. BOX 3267 WEST PALM BEACH FL 33402 |
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DO NOT WRITE IN THIS SPACE

| | | | | | |
|---|-----------------|---------------------|------------|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 06/01/1979 | |
| 21 Suite, Apt #, etc. | 22 City & State | 23 Zip | 24 Country | 25 FEI Number 59-1916561 | Applied For <input type="checkbox"/> Not Applicable |
| 26 Suite, Apt #, etc. | 27 City & State | 28 Zip | 29 Country | 30 | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
| g. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | |
| ECCLESTONE, E.L. JR 1555 PALM BCH. LAKES BLVD., STE. 1100 WEST PALM BEACH FL | | | | 81 Name | |
| | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | |
| | | | | 83 | |
| | | | | 84 City | FL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |

| | | | | | |
|--|--|--|--|--|--|
| SIGNATURE | | | | DATE | |
| Signature, typed or printed name of registered agent and title if applicable | | | | (NOTE: Registered Agent signature required when reinstating) | |

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|----------------------------|--|--|---|--|--|
| TITLE | CD | <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | ECCLESTONE, E L JR | | 1.2 NAME | | |
| STREET ADDRESS | 1555 PALM BCH. LKS. BLVD. | | 1.3 STREET ADDRESS | | |
| CITY - ST - ZIP | W PALM BEACH, FL 00000 | | 1.4 CITY - ST - ZIP | | |
| TITLE | VTD | <input type="checkbox"/> DELETE | 2.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | COOPER, RON | | 2.2 NAME | | |
| STREET ADDRESS | 1555 PALM BCH LKS BLVD. | | 2.3 STREET ADDRESS | | |
| CITY - ST - ZIP | W PALM BEACH, FL 00000 | | 2.4 CITY - ST - ZIP | | |
| TITLE | P | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | ECCLESTONE, E LLWYD III | | 3.2 NAME | | |
| STREET ADDRESS | 1555 PALM BEACH LAKES BLVD | | 3.3 STREET ADDRESS | | |
| CITY - ST - ZIP | W. PALM BEACH FL | | 3.4 CITY - ST - ZIP | | |
| TITLE | V | <input checked="" type="checkbox"/> DELETE | 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | RANDOLPH, BEGGIE E | | 4.2 NAME | William D. Yahn | |
| STREET ADDRESS | 1555 PALM BEACH LAKES BLVD | | 4.3 STREET ADDRESS | | |
| CITY - ST - ZIP | W. PALM BEACH FL | | 4.4 CITY - ST - ZIP | | |
| TITLE | VS | <input checked="" type="checkbox"/> DELETE | 5.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | LEVENDECKER, HELENA | | 5.2 NAME | Arlene Evans | |
| STREET ADDRESS | 1555 PALM BCH LAKES BLVD STE 1100 | | 5.3 STREET ADDRESS | | |
| CITY - ST - ZIP | W PALM BCH FL | | 5.4 CITY - ST - ZIP | | |
| TITLE | V | <input checked="" type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | CARLOUGH MELINE, JANE | | 6.2 NAME | | |
| STREET ADDRESS | 1555 PALM EBACH LAKES BLVD STE 1100 | | 6.3 STREET ADDRESS | | |
| CITY - ST - ZIP | WEST PALM BEACH FL | | 6.4 CITY - ST - ZIP | | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ron Cooper *Ron Cooper* 3/20/98 561/686-2000

CR2E034 (10/97)