


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90198 045 \*\*\*\*61.25

<b>DOCUMENT # 703878</b>							
1. Entity Name <b>THE PROFESSIONAL GOLFERS' ASSOCIATION OF AMERICA</b>							
Principal Place of Business 100 AVENUE OF CHAMPIONS PALM BEACH GARDENS, FL 33418-3653			Mailing Address 100 AVENUE OF CHAMPIONS PALM BEACH GARDENS, FL 33418-3653				
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		4. FEI Number <b>59-0785835</b>			
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
GARRITY, CHRISTINE M 100 AVENUE OF THE CHAMPIONS PALM BCH. GARDENS, FL 33418			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City		FL	Zip Code	
			8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
<b>Filing Fee Is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>			
				<b>Make check payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WARREN, ROGER		NAME	Warren, Roger			
STREET ADDRESS	100 AVENUE OF THE CHAMPIONS		STREET ADDRESS	100 Avenue of the Champions			
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418			
TITLE	AS	<input type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	GARRITY, CHRISTINE		NAME	Remy, Jim			
STREET ADDRESS	100 AVENUE OF THE CHAMPIONS		STREET ADDRESS	100 Avenue of the Champions			
CITY-ST-ZIP	PALM BEACH GRDNS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418			
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ORENDER, M.G.		NAME	Whitcomb, Brian			
STREET ADDRESS	100 AVENUE OF THE CHAMPIONS		STREET ADDRESS	100 Avenue of the Champions			
CITY-ST-ZIP	PALM BEACH GRDNS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418			
TITLE	MD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	AWTREY, JIM L		NAME				
STREET ADDRESS	100 AVENUE OF THE CHAMPIONS		STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDEN, FL		CITY-ST-ZIP				
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	POTTINGER, KIRK		NAME				
STREET ADDRESS	100 AVENUE OF THE CHAMPIONS		STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDENS, FL		CITY-ST-ZIP				
TITLE	COO	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOGIN, PAUL		NAME				
STREET ADDRESS	100 AVENUE OF THE CHAMPIONS		STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP				
12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <i>Christine Garrity</i>			Date: <i>2/22/05</i>		Daytime Phone #: <i>5616248548</i>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>							

**ATTACHMENT**  
**2005 ADDITIONAL DIRECTORS**

400 24304  
# 703878

Lyons, Donald  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

O'Rourke, Ted  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Krause, Brent  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Antkiewicz, James  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Flogge, Joe  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Marks, Tim  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Hamm, Jeffrey  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Porter, Jeff  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Vilven, Doug  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Veasey, Zack  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Sargent, Tom  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Dalpes, Grant  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Lezy, Normand  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Toms, David  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Greis, Leslie  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Lewis, Kevin  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418

Austin, Tony  
100 Avenue of the Champions  
Palm Beach Gardens, FL 33418