

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753078 (5)

1. Corporation Name

GOLF VILLAS AT PGA NATIONAL ASSOCIATION, INC.



Principal Place of Business	Mailing Address
7100 FAIRWAY DRIVE, #29 PALM BEACH GARDENS FL 33418	ALLSTATE PROPERTY MGT & REALTY 21000 BOCA RIO RD A-9 BOCA RATON FL 33483 US

3. Date Incorporated or Qualified 06/24/1980	3a. Date of Last Report 05/01/1995
4. FEI Number 59-2052743	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address		
21 275 Toney Penna Drive	26 Sunrise Management Co.		
22 Suite 10	27 Suite, Apt. #, etc. #10 275 Toney Penna Dr.		
23 City & State Jupiter, fl	28 City & State Jupiter, Fl		
24 Zip 33458	25 Country	29 Zip 33458	30 Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BERGER, BEN ALLSTATE PROPERTY MGT & REALTY 21000 BOCA RIO RD A-9 BOCA RATON FL 33483		81 Name Craig Kunkle	85 Zip Code 33458
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83 275 Toney Penna Drive, #10	
		84 City Jupiter	

11. Pursuant to the provisions of Sections 617.0503 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 3/18/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD TURK, SHELDON	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	326 BRAKEN WOOD CIRCLE	1.2 NAME	
STREET ADDRESS	PALM BEACH GARDENS FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D WARENER, CHARLES	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	606 BRACKENWOOD COVE	2.2 NAME	
STREET ADDRESS	PALM BEACH GARDENS FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VP GAFFNEY, EDNA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	101 BRACKENWOOD RD	3.2 NAME	
STREET ADDRESS	PALM BEACH GARDENS FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	T HABERKORN, JIM	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3352 PARKER HILL RD	4.2 NAME	
STREET ADDRESS	SANTA ROSA CA	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	SAT MCCOMBS, JACK	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	565 BRACKEN WOOD PL	5.2 NAME	SECRETARY JEAN KELLY
STREET ADDRESS	PALM BCH GDN FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	PALM BEACH GARDENS FL
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	D JOSEPH BRANCATO
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	PALM BEACH GARDENS FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 3-15-96 DAYTIME PHONE: 407-625-1525

CR2E037 (12/95)