2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842504

Entity Name: PGA TOUR, INC.

FILED Jan 24, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
112 PGA TO PONTE VE	OUR BLVD DRA BEACH, FL	. 32082 US				
Current Mailing Address:				New Mailing Address:		
112 PGA TO PONTE VE	OUR BLVD DRA BEACH, FL	. 32082 US				
FEI Number:	52-0999206 F	FEI Number Applied Fo	r() FEI Nur	mber Not Appli	cable () Certificat	te of Status Desired()
Name and	Address of Curi	rent Registered Ag	ent:	Name and	Address of New Regi	stered Agent:
112 PGA T0	N, RICHARD D OUR BOULEVAR DRA BCH., FL 3					
The above in the State		mits this statement	for the purpose o	of changing it	s registered office or re	egistered agent, or both,
SIGNATUR	E:					
Electronic Signature of Registered Agent			Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	EV () Del MOORHOUSE, EDV 25505 MARSH LAN PONTE VEDRA BC	WARD L IDING PARKWAY		Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	DCP () Del FERRIS, RICHARD 1436 RIDGE ROAD NORTHBROOK, IL) J.)		Title: Name: Address: City-St-Zip:	()Change() Addition
Title: Name: Address: City-St-Zip:	D () Del KNIGHT, CHARLES 24 FOREWAY DR ST LOUIS, MO 631	SF		Title: Name: Address: City-St-Zip:	C (X) Change (FINCHEM, TIMOTHY 7160 MARSH HAWK COU PONTE VEDRA BEACH, F	RT
Title: Name: Address: City-St-Zip:	D () Del VICTOR, GANZI 959 8TH AVE NEW YORK, NY 10			Title: Name: Address: City-St-Zip:	()Change() Addition
Title: Name: Address: City-St-Zip:	TD () Del DURANT, JOE 8451 SUNSHINE HI MOLINO, FL 3257	ILL ROAD		Title: Name: Address: City-St-Zip:	()Change() Addition
Title: Name: Address: City-St-Zip:	V () Del ANDERSON, RICHA 530 LAKE ROAD PONTE VEDRA BE	ARD D		Title: Name: Address: City-St-Zip:	EVP (X) Change (ANDERSON, RICHARD D 530 LAKE ROAD PONTE VEDRA BEACH, F	,

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD D. ANDERSON EVP 01/24/2007