

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005725

FILED
Feb 05, 2008
Secretary of State

Entity Name: UNITED STATES GOLF ASSOCIATION, INC.

Current Principal Place of Business:

77 LIBERTY CORNER ROAD
FAR HILS, NJ 07931

New Principal Place of Business:

Current Mailing Address:

77 LIBERTY CORNER ROAD
FAR HILS, NJ 07931

New Mailing Address:

FEI Number: 13-1427105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: MARTIN, PAMELA
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

Title: V () Delete
Name: HYLER, JAMES B JR
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

Title: V () Delete
Name: VERNON, JAMES F
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

Title: S () Delete
Name: CRISP, EMILY R
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

Title: T () Delete
Name: NELSON, FREDRIC C
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

Title: S () Delete
Name: BERMAN, BELINDA
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: HYLER, JAMES B JR
Address: 77 LIBERTY CORNER ROAD
City-St-Zip: FAR HILS, NJ 07931

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PAMELA MARTIN

T

02/05/2008

Electronic Signature of Signing Officer or Director

_____ Date