

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18472

FILED  
Jan 11, 2005  
Secretary of State

Entity Name: PGA TOUR CHARITIES, INC.

**Current Principal Place of Business:**

112 PGA TOUR BLVD  
PONTE VERDE BEACH, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

112 PGA TOUR BLVD  
PONTE VERDA BCH, FL 32082 US

**New Mailing Address:**

FEI Number: 59-2774423      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ANDERSON, RICHARD D  
112 PGA TOUR BLVD  
PONTE VEDRA BEACH, FL 32082 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: VP ( ) Delete  
Name: PRICE, RON  
Address: 112 PGA TOUR BLVD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DC ( ) Delete  
Name: FINCHEM, TIMOTHY W.,  
Address: 7160 MARSH HAWK COURT  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DPT ( ) Delete  
Name: FERRIS, RICHARD J.  
Address: 1436 RIDGE ROAD  
City-St-Zip: NORTHBROOK, IL 60062

Title: D ( ) Delete  
Name: BROWNE, OLIN  
Address: 203 COLONY ROAD  
City-St-Zip: JUPITER, FL 33469

Title: D ( ) Delete  
Name: CONNELLY, JACK  
Address: 2295 COUNTRY CLUB DRIVE  
City-St-Zip: HUNTINGDON VALLEY, PA 19006

Title: VP ( ) Delete  
Name: ANDERSON, RICHARD D  
Address: 8719 ROLLING BROOK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:

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 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 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

VP

01/11/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date