


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 28 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # N33764 (4)**  
1. Corporation Name  
**SENIOR PLAYERS CHAMPIONSHIP CHARITIES, INC.**



Principal Place of Business <b>112 TPC BLVD PONTE VEDRA FL 32082</b>	Mailing Address <b>112 TPC BLVD PONTE VEDRA FL 32082</b>
---	---

3. Date incorporated or Qualified <b>08/15/1989</b>		
4. FEI Number <b>59-2998912</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

2. Principal Place of Business <b>21 112 PGA TOUR Blvd.</b>	2a. Mailing Address <b>26 112 PGA TOUR Blvd.</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**ATTER, HELEN S.  
112 TPC BLVD  
PONTE VEDRA FL 32082**

10. Name and Address of New Registered Agent

81 Name <b>Anderson, Richard D.</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>112 PGA TOUR Boulevard</b>	
83	
84 City <b>Ponte Vedra Beach</b>	85 Zip Code <b>FL 32082</b>

11. Pursuant to the provisions of Sections 617.0502 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 *Richard D. Anderson* **Richard D. Anderson** **4/15/98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DCP KUGHN, RICHARD P 50625 RICHARD W BLVD CHESTERFIELD MI</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition   <b>48051</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D RENICK, JAMES C UM, OFC OF THE CHANCELLOR DEARBORN MI</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition   <b>48128-1491</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D FINCHEM, TIMOTHY 112 TPC BLVD PONTE VEDRA BCH FL</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  <b>112 PGA TOUR Boulevard</b>  <b>32082</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D PLUMMER, DEREK 750 STEPHENSON HIGHWAY TROY MI</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition   <b>48083</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MCNAMARA, EDWARD H WAYNE CO BLDG, 600 RANDOLPH DETROIT MI</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition   <b>48226</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DORAN, WAYNE 1 PARKLANE BLVD, STE 1500 E DEARBORN MI</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition   <b>48126</b>

14. 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 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: **Richard D. Anderson** *Richard D. Anderson* **4/15/98** **904/285-3700**

CR2E037 (10/97)

**SENIOR PLAYERS CHAMPIONSHIP CHARITIES, INC.**

**Item 12. Officers and Directors (continued)**

**Title:** V  
**Name:** Hughes, Henry  
**Street Address:** 112 PGA TOUR Boulevard  
**City-St-Zip:** Ponte Vedra Beach, Florida 32082

**Title:** T  
**Name:** Zink, Charles L.  
**Street Address:** 112 PGA TOUR Boulevard  
**City-St-Zip:** Ponte Vedra Beach, Florida 32082

**Title:** S  
**Name:** Anderson, Richard D.  
**Street Address:** 112 PGA TOUR Boulevard  
**City-St-Zip:** Ponte Vedra Beach, Florida 32082