

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

1 of 2

DOCUMENT # P92000012720 (8)

1. Corporation Name

PGA TOUR HOLDINGS, INC.



Principal Place of Business 112 TPC BOULEVARD PONTE VEDRA FL 32082	Mailing Address 112 TPC BOULEVARD PONTE VEDRA FL 32082
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/17/1992	3a. Date of Last Report 04/18/1995
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-3159885	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
TRIOLA, JAMES C 112 TPC BOULEVARD PONTE VEDRA FL		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer 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 607.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and that applicable to the registered agent signature required when re-registering.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FERRIS, RICHARD J	1.2 NAME	
STREET ADDRESS	1436 RIDGE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	1.4 CITY-ST-ZIP	60062
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KELLY, VERNON A JR	2.2 NAME	
STREET ADDRESS	112 TPC BOULEVARD	2.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA FL	2.4 CITY-ST-ZIP	32082
TITLE	DP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FINCHEM, TIMOTHY W	3.2 NAME	
STREET ADDRESS	112 TPC BOULEVARD	3.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA FL	3.4 CITY-ST-ZIP	32082
TITLE	DV <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZINK, CHARLES L	4.2 NAME	
STREET ADDRESS	112 TPC BOULEVARD	4.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA FL	4.4 CITY-ST-ZIP	32082
TITLE	DV <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORHOUSE, EDWARD L	5.2 NAME	
STREET ADDRESS	2403 PONTE VEDRA BOULEVARD	5.3 STREET ADDRESS	8009 Whisper Lake Lane
CITY-ST-ZIP	PONTE VEDRA BEACH FL	5.4 CITY-ST-ZIP	Ponte Vedra Beach, FL 32082
TITLE	S <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TRIOLA, JAMES C	6.2 NAME	
STREET ADDRESS	112 TPC BOULEVARD	6.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA FL	6.4 CITY-ST-ZIP	32082

continued

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James C. Triola April 12, 1996 904/285-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
James C. Triola, Secretary
DATE PHONE #

CR2E034 (12/95)

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PGA TOUR HOLDINGS, INC.

Item 12. Officers and Directors (continued)

Title	V
Name	Walser, Joe, Jr.
Address	112 TPC Boulevard
City-St-Zip	Ponte Vedra Beach, FL 32082

Title	V/T
Name	Winsor, Steven A.
Address	112 TPC Boulevard
City-St-Zip	Ponte Vedra Beach, FL 32082