

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**May 16 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**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 32082-3046**

3. Date Incorporated or Qualified: **12/17/1992**      3a. Date of Last Report: **04/16/1996**  
 4. FEI Number: **59-3159885**      Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **21** Suite, Apt. #, etc. **22** City & State **23** Zip **24** Country **25**  
 2a. Mailing Address: **26** Suite, Apt. #, etc. **27** City & State **28** Zip **29** Country **30**

9. Name and Address of Current Registered Agent: **TRIOLA, JAMES C 112 TPC BOULEVARD PONTE VEDRA FL**  
 10. Name and Address of New Registered Agent: **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 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 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Signature, typed or printed name of registered agent and fee, if applicable)      (NOTE: Registered Agent signature required when re-instating)      DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	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	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	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FANCHEM, 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	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	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MOORHOUSE, EDWARD L	5.2 NAME	
STREET ADDRESS	8009 WHISPER LAKE LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA BCH FL	5.4 CITY-ST-ZIP	32082
TITLE	S	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 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 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**      *James C. Triola*      04/25/97      904/285-3700

CR2E034 (9/96)

PGA TOUR HOLDINGS, INC.

Item 12. Officers and Directors (continued)

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