

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000012720

FILED  
Feb 06, 2007  
Secretary of State

Entity Name: PGA TOUR HOLDINGS, INC.

**Current Principal Place of Business:**

112 PGA TOUR BLVD  
PONTE VEDRA, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

112 PGA TOUR BLVD  
PONTE VEDRA, FL 32082 US

**New Mailing Address:**

FEI Number: 59-3159885      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TRIOLA, JAMES C  
112 PGA TOUR BOULEVARD  
PONTE VEDRA, FL 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

Title: V ( ) Delete  
Name: KELLY, VERNON A JR  
Address: 112 PGA TOUR BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

Title: DP ( ) Delete  
Name: FINCHEM, TIMOTHY W  
Address: 112 PGA TOUR BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

Title: DV ( ) Delete  
Name: ZINK, CHARLES L  
Address: 112 PGA TOUR BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

Title: DV ( ) Delete  
Name: MOORHOUSE, EDWARD L  
Address: 112 PGA TOUR BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

Title: SV ( ) Delete  
Name: TRIOLA, JAMES C  
Address: 112 PGA TOUR BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

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

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

Title: V (X) Change ( ) Addition  
Name: PILLSBURY, DAVID  
Address: 112 PGA TOUR BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES C. TRIOLA

SV

02/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date