

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000012720

Entity Name: PGA TOUR HOLDINGS, INC.

Current Principal Place of Business:

100 PGA TOUR BLVD
PONTE VEDRA, FL 32082

Current Mailing Address:

100 PGA TOUR BLVD
PONTE VEDRA, FL 32082 US

FEI Number: 59-3159885

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRIOLA, JAMES C
100 PGA TOUR BOULEVARD
PONTE VEDRA, FL US

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

Officer/Director Detail :

Title DC
Name GANZI, VICTOR F
Address 112 PGA TOUR BLVD
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title V
Name PILLSBURY, DAVID
Address 100 PGA TOUR BOULEVARD
City-State-Zip: PONTE VEDRA FL 32082

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

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

Title DV
Name MOORHOUSE, EDWARD L
Address 112 PGA TOUR BOULEVARD
City-State-Zip: PONTE VENDRA BCH FL 32082

Title VS
Name TRIOLA, JAMES C
Address 100 PGA TOUR BOULEVARD
City-State-Zip: PONTE VEDRA FL 32082

Title V
Name ANDERSON, RICHARD D
Address 100 PGA TOUR BLVD
City-State-Zip: PONTE VEDRA FL 32082

Title VT
Name PRICE, RONALD E
Address 100 PGA TOUR BLVD
City-State-Zip: PONTE VEDRA FL 32082

I hereby 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 all other like empowered.

SIGNATURE: JAMES C TRIOLA

SECRETARY

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date