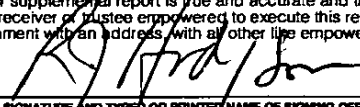


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90075 017 \*\*\*\*70.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------|
| <b>DOCUMENT # 747410</b><br>1. Entity Name<br><b>PGA PROPERTY OWNERS ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                              |                                                                                     |                                                                                                                                                                                                                                       |  |         |
| Principal Place of Business<br><b>7100 FAIRWAY DR<br/>SUITE 29<br/>PALM BEACH GARDENS, FL 33418 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                              |                                                                                     | Mailing Address<br><b>7100 FAIRWAY DR<br/>SUITE 29<br/>PALM BEACH GARDEN, FL 33418 US</b>                                                                                                                                             |                                                                                   |         |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                              |                                                                                     | 3. Mailing Address                                                                                                                                                                                                                    |                                                                                   |         |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                              |                                                                                     | Suite, Apt. #, etc.                                                                                                                                                                                                                   |                                                                                   |         |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                                                                                     | City & State                                                                                                                                                                                                                          |                                                                                   |         |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                              | Country                                                                             | Zip                                                                                                                                                                                                                                   |                                                                                   | Country |
| 4. FEI Number<br><b>59-1969421</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                              |                                                                                     |                                                                                                                                                                                                                                       | Applied For<br><input type="checkbox"/> Not Applicable                            |         |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                     |                                                                                                                                                                                                                                       | <b>\$8.75 Additional Fee Required</b>                                             |         |
| 6. Name and Address of Current Registered Agent<br><br><b>FIELDS, GARY D<br/>ADMIRALTY TOWER, STE 900<br/>4400 PGA BLVD<br/>PALM BCH GDNS, FL 33410</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                              |                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                                   |         |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |         |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> <div style="text-align: right;"><small>DATE</small></div>                                                                                                                                                                                                                                                                                                                                                                                                     |                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |         |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2006</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                              | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                                                                                                                                       | <b>\$5.00 May Be Added to Fees</b>                                                |         |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |         |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                              |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                                                          |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | PD                           |                                                                                     | TITLE                                                                                                                                                                                                                                 | PRESIDENT                                                                         |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | HODGSON, ROBERT              |                                                                                     | NAME                                                                                                                                                                                                                                  | HODGSON BOB                                                                       |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7100 FAIRWAY DR #29          |                                                                                     | STREET ADDRESS                                                                                                                                                                                                                        | 7100 FAIRWAY DR. #29                                                              |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PALM BEACH GARDENS, FL 33413 |                                                                                     | CITY-ST-ZIP                                                                                                                                                                                                                           | PALM BEACH GARDENS FL 33418                                                       |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | SD                           |                                                                                     | TITLE                                                                                                                                                                                                                                 | SD                                                                                |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | QUIRK, BARBARA               |                                                                                     | NAME                                                                                                                                                                                                                                  | TALIAFERRO, LYNN                                                                  |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7100 FAIRWAY DR 29           |                                                                                     | STREET ADDRESS                                                                                                                                                                                                                        | 7100 FAIRWAY DR 29                                                                |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PALM BEACH GARDENS, FL 33418 |                                                                                     | CITY-ST-ZIP                                                                                                                                                                                                                           | PALM BEACH GARDENS FL 33418                                                       |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | VD                           |                                                                                     | TITLE                                                                                                                                                                                                                                 | VD                                                                                |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SLIFKA, PHILIP               |                                                                                     | NAME                                                                                                                                                                                                                                  | PAULUS, DONALD                                                                    |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7100 FAIRWAY DR. #29         |                                                                                     | STREET ADDRESS                                                                                                                                                                                                                        | 7100 FAIRWAY DR 29                                                                |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PALM BEACH GARDENS, FL 33418 |                                                                                     | CITY-ST-ZIP                                                                                                                                                                                                                           | PALM BEACH GARDENS, FL 33418                                                      |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | D                            |                                                                                     | TITLE                                                                                                                                                                                                                                 | D                                                                                 |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | METLIS, SCHYLER              |                                                                                     | NAME                                                                                                                                                                                                                                  | ENGELSHER, MIKE                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7100 FAIRWAY DR # 29         |                                                                                     | STREET ADDRESS                                                                                                                                                                                                                        | 7100 FAIRWAY DR 29                                                                |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PALM BCH GDNS, FL 33418      |                                                                                     | CITY-ST-ZIP                                                                                                                                                                                                                           | PALM BEACH GARDEN FL 33418                                                        |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TD                           |                                                                                     | TITLE                                                                                                                                                                                                                                 |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | BROWN, ROBERT                |                                                                                     | NAME                                                                                                                                                                                                                                  |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7100 FAIRWAY DRIVE # 29      |                                                                                     | STREET ADDRESS                                                                                                                                                                                                                        |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PALM BEACH GARDENS, FL 33418 |                                                                                     | CITY-ST-ZIP                                                                                                                                                                                                                           |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                              |                                                                                     | TITLE                                                                                                                                                                                                                                 |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                     | NAME                                                                                                                                                                                                                                  |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                              |                                                                                     | STREET ADDRESS                                                                                                                                                                                                                        |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              |                                                                                     | CITY-ST-ZIP                                                                                                                                                                                                                           |                                                                                   |         |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. |                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |         |
| <b>SIGNATURE:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                     | <b>ROBERT J. HODGSON</b>                                                                                                                                                                                                              |                                                                                   |         |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                              |                                                                                     | <small>Date</small>                                                                                                                                                                                                                   |                                                                                   |         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                     | <small>Daytime Phone #</small>                                                                                                                                                                                                        |                                                                                   |         |

**60012560**



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