

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747410

FILED
Jan 29, 2010
Secretary of State

Entity Name: PGA PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7100 FAIRWAY DR
SUITE 29
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

Current Mailing Address:

7100 FAIRWAY DR
SUITE 29
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 59-1969421 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FIELDS, GARY D
ADMIRALTY TOWER, STE 900
4400 PGA BLVD
PALM BCH GDNS, FL 33410 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

OFFICERS AND DIRECTORS:

Title: P
Name: HODGSON, ROBERT
Address: 7100 FAIRWAY DR #29
City-St-Zip: PALM BEACH GARDENS, FL 33413

Title: SD
Name: HUGHES, JACK
Address: 7000 FAIRWAY DR 29
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VD
Name: ENGELSHER, MIKE
Address: 7100 FAIRWAY DR. #29
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D
Name: PAULUS, DON
Address: 7100 FAIRWAY DR # 29
City-St-Zip: PALM BCH GDNS, FL 33418

Title: TD
Name: BROWN, ROBERT
Address: 7100 FAIRWAY DRIVE # 29
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D
Name: SLIFKA, PHIL
Address: 7100 FAIRWAY DR., 29
City-St-Zip: PALM BEACH GARDENS, FL 33416

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

SIGNATURE: ROBERT J. HODGSON

P

01/29/2010

Electronic Signature of Signing Officer or Director

_____ Date