2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 27, 2006 8:00 am **DOCUMENT # 750910 Secretary of State** 1. Entity Name 02-27-2006 90087 019 ****61.25 THE SOUTH FLORIDA SECTION, PROFESSIONAL GOLFERS ASSOCIATION OF AMERICA, INC. Principal Place of Business Mailing Address 10804 W. SAMPLE ROAD 10804 W. SAMPLE ROAD CORAL SPRINGS FL 33075-8372 CORAL SPRINGS FL 33075-8372 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-1950212 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARRONE KEVIN J Street Address (P.O. Box Number is Not Acceptable) 10804 WEST SAMPLE ROAD **CORAL SPRINGS FL 33065** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE Addition ☐ Change MARRONE, KEVIN NAME NAME 10804 W. SAMPLE RD STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33065 CITY-ST-78P CITY-ST-7IP Delete TITLE TITLE X Change ☐ Addition WILDENHAUS, TOM NAME NAME Kurtzeborn, Jim 9393 VANDERBILT RS EXT STREET ADDRESS STREET ADDRESS 15391Cannongate Dr SE NAPLES FL 34120 CITY-ST-ZIP CITY-ST-ZIP Ft. Myers FL 33912 TITLE TITLE Change ☐ Addition Delete VD) KURTZEBORN, JIM NAME Raimer, Jeff STREET ADDRESS 15391 CANNONGATE DR SE STREET ADDRESS 3470 Club Center Blvd FORT MYERS FL 33912 CITY-ST-7IP CITY-ST-ZIP Naples, FL 34114 TITLE STD TITLE ★ Change ☐ Addition Delete STD RAIMER, JEFF NAME NAME Cox, Steve STREET ADDRESS 3470 CLUB CENTER BLVD. STREET ADDRESS 2823 Kittbuck Way CITY-ST-ZIP NAPLES FL 34114 CITY-ST-ZIE West Palm Beach, FL 33411 TITLE Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP TITLE ☐ Delete Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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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. PPSP. LIT. FZP 306/15 SNOWARM. I WILL

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

SIGNATURE: