2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#769565

FILED Mar 29, 2006 Secretary of State

Entity Name: CHAMPIONS TOUR TOURNAMENT ASSOCIATION INC

Current Principal Place of Business:			New P	New Principal Place of Business:		
13000 SA\ STE. 37	WGRASS VILL	AGE CIRCLE				
	EDRA BEACH	, FL 32082 US				
Current Mailing Address:			New M	New Mailing Address:		
13000 SA\ STE. 37	WGRASS VILL	AGE CIRCLE				
	EDRA BEACH	, FL 32082 US				
FEI Number	: 59-2483547	FEI Number Applied For ()	FEI Number Not	Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name a	and Address of N	lew Registered Agent:	
MANNING, L 13000 SAWGRASS VILLAGE CIR			13000 \$	MANNING, LANA 13000 SAWGRASS VILLAGE CIR		
STE 37 PONTE VEDRA BEACH, FL 32082 US				STE 37 PONTE VEDRA BEACH, FL 32082 US		
	e named entity e of Florida.	submits this statement for th	e purpose of changi	ng its registered o	ffice or registered agent, or both,	
SIGNATU	RE: LANA MA	ANNING			03/29/2006	
	Electro	nic Signature of Registered /	Agent		Date	
OFFICER	S AND DIREC	CTORS:	ADDIT	IONS/CHANGES	TO OFFICERS AND DIRECTORS	
Name: Address: City-St-Zip: Title:	GARCIA, PHIL 600 SOUTH BA PENSACOLA, D (ARRACKS STREET	Title: Name: Address: City-St-Z Title:	HAWK, AMY 2202 N. WEST ip: TAMPA, FL 336 PC (X)	Change()Addition SHORE BLVD., 5TH FLOOR	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	GARCIA, PHIL 600 SOUTH BA PENSACOLA, D (BURRIS, BOB	ARRACKS STREET FL 32502 US) Delete 35TH STREET, STE. 260	Name: Address: City-St-Z	HAWK, AMY 2202 N. WEST ip: TAMPA, FL 336 PC (X) GARCIA, PHIL 11490 EMERAL	Change () Addition SHORE BLVD., 5TH FLOOR 507 US Change () Addition D COAST PKWY., SUITE 202	
Name: Address: City-St-Zip: Title: Name: Address:	GARCIA, PHIL 600 SOUTH BA PENSACOLA, D (BURRIS, BOB 4707 WEST 13 LEAWOOD, KS D (HAWK, AMY	ARRACKS STREET FL 32502 US) Delete 35TH STREET, STE. 260 S 66224 US) Delete	Name: Address: City-St-Z Title: Name: Address:	HAWK, AMY 2202 N. WEST TAMPA, FL 336 PC (X) GARCIA, PHIL 11490 EMERAL DESTIN, FL 32 D (X) BURRIS, BOB 4707 WEST 13:	Change () Addition SHORE BLVD., 5TH FLOOR 507 US Change () Addition D COAST PKWY., SUITE 202 550 US Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GARCIA, PHIL 600 SOUTH BA PENSACOLA, D (BURRIS, BOB 4707 WEST 13 LEAWOOD, KS D (HAWK, AMY 2202 N. WEST TAMPA, FL 33	ARRACKS STREET FL 32502 US) Delete 35TH STREET, STE. 260 S 66224 US) Delete T SHORE BLVD., 5TH FLOOR 3607 US) Delete BRIAN VOOD AVE	Name: Address: City-St-Z Title: Name: Address: City-St-Z Title: Name: Address:	HAWK, AMY 2202 N. WEST ip: TAMPA, FL 336 PC (X) GARCIA, PHIL 11490 EMERAL ip: DESTIN, FL 32 D (X) BURRIS, BOB 4707 WEST 13. LEAWOOD, KS D (X) STARR, JEFF 10920 JUSTIN I	Change () Addition SHORE BLVD., 5TH FLOOR 607 US Change () Addition D COAST PKWY., SUITE 202 550 US Change () Addition 5TH ST., SUITE 260 66224 US Change () Addition DR.	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: Address: Address:	GARCIA, PHIL 600 SOUTH BA PENSACOLA, D (BURRIS, BOB 4707 WEST 13 LEAWOOD, KS D (HAWK, AMY 2202 N. WEST TAMPA, FL 33 D (FITZGERALD, 1140 GREENV WILMETTE, IL O (MANNING, L 13000 SAWGE	ARRACKS STREET FL 32502 US) Delete 35TH STREET, STE. 260 S 66224 US) Delete T SHORE BLVD., 5TH FLOOR 3607 US) Delete BRIAN VOOD AVE	Name: Address: City-St-Z Title: Name: Address: City-St-Z Title: Name: Address: City-St-Z Title: Name: Address: Address: Address: Address: Address:	HAWK, AMY 2202 N. WEST ip: TAMPA, FL 336 PC (X) GARCIA, PHIL 11490 EMERAL ip: DESTIN, FL 32 D (X) BURRIS, BOB 4707 WEST 13: LEAWOOD, KS D (X) STARR, JEFF 10920 JUSTIN I ip: URBANDALE, I/ ED (X) MANNING, LAN, 13000 SAWGR.	Change () Addition SHORE BLVD., 5TH FLOOR 607 US Change () Addition D COAST PKWY., SUITE 202 550 US Change () Addition 5TH ST., SUITE 260 66224 US Change () Addition DR. A 50322 US	

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

SIGNATURE: LANA MANNING ED 03/29/2006