

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F76352 (6)

1. Corporation Name

PGA/PGA TOUR PROPERTIES, INC.



Principal Place of Business

Mailing Address

% DEANE R. BEMAN
112 TPC BLVD.
PONTE VEDRA BCH. FL 32082

% DEANE R. BEMAN
112 TPC BLVD.
PONTE VEDRA BCH. FL 32082

3. Date Incorporated or Qualified

04/15/1982

3a. Date of Last Report

04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 DELETE %Deane R. Beman

26 DELETE %Deane R. Beman

4. FEI Number

59-2187951

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOORHOUSE, EDWARD L.
112 TPC BOULEVARD
PONTE VEDRA BCH. FL 32082

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and the applicable

DATE: Registered Agent signature required when revoking

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☐ DELETE

NAME PD
FINCHEM, TIMOTHY
STREET ADDRESS 12612 MARSH CREEK DR
CITY-ST-ZIP PONTE VEDRA BEACH FL

TITLE ☐ DELETE

NAME D
ZINK, CHARLES L
STREET ADDRESS 20 POINCIANA WAY
CITY-ST-ZIP PONTE VEDRA FL

TITLE ☐ DELETE

NAME DV
MOORHOUSE, EDWARD L
STREET ADDRESS 2403 PONTE VEDRA BLVD.
CITY-ST-ZIP PONTE VEDRA FL

TITLE ☐ DELETE

NAME ST
TRIOLA, JAMES
STREET ADDRESS 1165 SALT MARSH CIRCLE
CITY-ST-ZIP PONTE VEDRA FL

TITLE ☒ DELETE

NAME S
FEHR, RICK
STREET ADDRESS 2014-222 AVENUENE
CITY-ST-ZIP REDMOND WA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

Ponte Vedra Beach, FL 32082

2.1 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

Ponte Vedra Beach, FL 32082

3.1 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

8009 Whisper Lake Lane
Ponte Vedra Beach, FL 32082

4.1 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

Ponte Vedra Beach, FL 32082

5.1 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James C. Triola, Secretary

April 12, 1996

904/285-3700

Us/Phone #

CR2E034 (12/95)