

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

**112 TPC BLVD.
PONTE VEDRA BCH. FL 32082
US**

Mailing Address

**112 TPC BLVD.
PONTE VEDRA BCH. FL 32082
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 112 PGA TOUR Blvd.

Suite, Apt. #, etc.

22
City & State

23
Zip

Country

24

2a. Mailing Address

25 112 PGA TOUR Blvd.

Suite, Apt. #, etc.

27
City & State

28
Zip

Country

29

3. Date Incorporated or Qualified

04/15/1982

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
112 PGA TOUR Boulevard

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PD
FINCHEM, TIMOTHY
7160 MARSH HAWK CT.
PONTE VEDRA BCH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
ZINK, CHARLES L
20 POINCIANA WAY
PONTE VEDRA BCH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DV
MOORHOUSE, EDWARD L
8009 WHISPER LAKE LANE
PONTE VEDRA BCH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**ST
TRIOLA, JAMES
1165 SALT MARSH CIRCLE
PONTE VEDRA BCH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

32082

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

32082

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

32082

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

32082

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

James C. Triola

James C. Triola

4/9/98

904/285-3700

CR2E034 (10/97)