2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H53359

FILED Mar 17, 2009 Secretary of State

Entity Name: PGA TOUR PUBLIC GOLF (JACKSONVILLE), INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:			
10440 TOURNAMENT LANE JACKSONVILLE, FL 32222 US							
Current Mailing Address:			New Maili	New Mailing Address:			
112 PGA TOUR BLVD PONTE VEDRA BEACH, FL 320823046 US							
FEI Number: 59-2551341 FEI Number Applied For () FEI Number			umber Not Appl	mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
TRIOLA, JAMES C 112 PGA TOUR BOULEVARD PONTE VEDRA, FL 32082 US							
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:							
	Electroni	c Signature of Registered Agent			Date		
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PILLSBURY, DAY 24604 HARBOUI		Title: Name: Address: City-St-Zip:	()0	Change () Additi	on	
Title: Name: Address: City-St-Zip:	D () FINCHEM, TIMO 7160 MARSH HA PONTE VEDRA I	WK CT.	Title: Name: Address: City-St-Zip:	D (X) C FINCHEM, TIMOT 7160 MARSH HAY PONTE VEDRA B	WK CT.	ion	
Title: Name: Address: City-St-Zip:	MOORHOUSE, E 25505 MARSH L	Delete :DWARD L ANDING PARKWAY BEACH, FL 32082	Title: Name: Address: City-St-Zip:	()0	Change () Additi	on	
Title: Name: Address: City-St-Zip:	V () I JOHN HUGGHIN 112 PGA TOUR PONTE VEDRA I	BLVD.	Title: Name: Address: City-St-Zip:	V (X) C HUGGHINS, JOHI 112 PGA TOUR E PONTE VEDRA B	BLVD.	ion	
Title: Name: Address: City-St-Zip:	ST () TRIOLA, JAMES 1209 SALT CRE PONTE VEDRA I	EK ISLE DRIVE	Title: Name: Address: City-St-Zip:	() C	Change () Additi	on	
Title: Name: Address: City-St-Zip:	HUGGHINS, JOH 100 PGA TOUR		Title: Name: Address: City-St-Zip:	() C	Change () Additi	on	
I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.							

SIGNATURE: JAMES C. TRIOLA ST 03/17/2009

Electronic Signature of Signing Officer or Director Date