2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K45758

FILED Feb 06, 2007 Secretary of State

Entity Name: TOURNAMENT PLAYERS CLUB AT CHEVAL, INC.

Current Principal Place of Business:					New Principal Place of Business:				
5100 TERRAIN DE GOLF DRIVE LUTZ, FL 33549 US									
Current Mailing Address:				New	New Mailing Address:				
112 PGA TOUR BLVD PONTE VEDRA, FL 320823046 US									
FEI Number: 59-2633623 FEI Number Applied For () FEI Number				FEI Number No	nber Not Applicable () Certificate of Status Desired ()				Desired ()
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
TRIOLA, JAMES C 112 PGA TOUR BLVD PONTE VEDRA FL, 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:									
Electronic Signature of Registered Agent								Date	
Election Campaign Financing Trust Fund Contribution ().									
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DSV (ZINK, CHARLE 104 PLANTER PONTE VEDRA	S ROW EAST		Title: Name: Addres City-Si	ss:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	DP (KELLY, VERNO 5895 COUNTY ST. AUGUSTIN	ROAD 214	2	Title: Name: Addres City-Si	ss:	DP PILLSBURY, 24604 HARB PONTE VEDI	OUR VIEW I	DRIVE	
Title: Name: Address: City-St-Zip:	D (FINCHEM, TIM 7160 MARSH I PONTE VEDRA	HAWK CT.	2082	Title: Name: Addres City-Si	ss:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	SRV (MOORHOUSE 25505 MARSH PONTE VEDRA	LANDING PA		Title: Name: Addres City-Si	ss:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	V (DAVID PILLSB 112 PGA TOUI PONTE VEDRA	R BLVD	2082	Title: Name: Addres City-Si	ss:	V HUGGHINS, 112 PGA TO PONTE VEDI	UR BLVD		
Title: Name: Address: City-St-Zip:	VS (TRIOLA, JAME 1209 SALT CR PONTE VEDRA	REEK ISLE DE		Title: Name: Addres City-Si	ss:		() Change	() Addition	
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 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 VS 02/06/2007