2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000052900

1. Entity Name

PGA WASH VENTURES, LLC



Principal Place of Business

Mailing Address

2667 MARSEILLES DRIVE PALM BEACH GARDENS, FL 33410 2667 MARSEILLES DRIVE

PALM BEACH GARDENS, FL 33410

FILED Jul 17, 2007 8:00 am Secretary of State

05-16-2007 90175 022 ****55.00



04302007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-4638129

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSS, JEREMY P 220 SOUTH FRANKLIN STREET TAMPA, FL 33602

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8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE_	Springer, types of intrices name of registered agent and title if applicable. ((NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MR. FREY, BRUCE J 2667 MARSEILLES DRIVE PALM BEACH GARDENS, FL 33410		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WE	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-SY-ZIP	4		
TITLE NAME			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or true receiver or trustale empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP