

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001285

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: PGA CORRIDOR ASSOCIATION, INC.

## Current Principal Place of Business:

3001 PGA BLVD.  
SUITE 200  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

## Current Mailing Address:

3001 PGA BLVD.  
SUITE 200  
PALM BEACH GARDENS, FL 33410

## New Mailing Address:

FEI Number: 65-1026250

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATHISON, STEPHEN S  
5606 PGA BOULEVARD  
SUITE 211  
PALM BEACH GARDENS, FL 33418 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: D/C ( ) Delete  
Name: COHEN, STEVE  
Address: 222 LAKEVIEW AVE., SUITE 1000  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D/C ( ) Delete  
Name: LEACH, GREG  
Address: 3001 PGA BLVD., SUITE 200  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D/S ( ) Delete  
Name: EICHNER, JOEY  
Address: 4300 CATALFUMO WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D/T ( ) Delete  
Name: ANDERSON, PATTI  
Address: 3160 PGA BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/C (X) Change ( ) Addition  
Name: COHEN, STEVE  
Address: 222 LAKEVIEW AVE., SUITE 1000  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D/C (X) Change ( ) Addition  
Name: LEACH, GREG  
Address: 3001 PGA BLVD., SUITE 200  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D/T (X) Change ( ) Addition  
Name: WOODALL, PHIL  
Address: 3601 PGA BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREG LEACH

C/D

04/22/2008

Electronic Signature of Signing Officer or Director

Date