2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2010
Secretary of State

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Entity Name: PGA HOTEL-RETAIL PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1997 ANNAPOLIS EXCHANGE PARKWAY
SUITE 500
ANNAPOLIS, MD 21401

New Principal Place of Business:

1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
ANNAPOLIS, MD 21401

Current Mailing Address:

1997 ANNAPOLIS EXCHANGE PARKWAY
SUITE 500
ANNAPOLIS, MD 21401

New Mailing Address:

1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
ANNAPOLIS, MD 21401

FEI Number: 84-1597212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PRED
Name: WARFIELD, CARROLL M PREDIR
Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
City-St-Zip: ANNAPOLIS, MD 21401

Title: SECD
Name: WILES, BRUCE SECDIR
Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
City-St-Zip: ANNAPOLIS, MD 21401

Title: VPT
Name: DABNEY, GEORGE VPTREAS
Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
City-St-Zip: ANNAPOLIS, MD 21401

Title: DIR
Name: CHANNING, JOEL DIR
Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
City-St-Zip: ANNAPOLIS, MD 21401

Title: VPS
Name: SUN DO, NGHIEM VPSEC
Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 500
City-St-Zip: ANNAPOLIS, MD 21401

I hereby 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 all other like empowered.

SIGNATURE: KELLY LETTMANN POA 04/06/2010

Electronic Signature of Signing Officer or Director — Date