2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25506

FILED Jan 06, 2010 Secretary of State

Entity Name: PGA TOUR WIVES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

112 PGA TOUR BOULEVARD PONTE VEDRA, FL 32082 US

Current Mailing Address: New Mailing Address:

PGA TOUR WIVES ASSOC.

P.O. BOX 74

PONTE VEDRA BCH, FL 32004 US

FEI Number: 59-2903646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: PD

Name: WILSON, AMY

Address: 105 EAST VALLETTE STREET, PMB#1340

City-St-Zip: ELMHURST, IL 60126

Title: VPD

Name: PERRY, SANDY
Address: 418 QUAIL RIDGE ROAD
City-St-Zip: FRANKLIN, KY 42134

Title: VPS

Name: ROSE, KATE

Address: 9818 COVENT GARDEN DRIVE

City-St-Zip: ORLANDO, FL 32827

Title: VPD

Name: OBERHOLSER, ANGIE

Address: 13845 N. SCOTTSDALE ROAD, #200

City-St-Zip: SCOTTSDALE, AZ 85260

Title: VPD

Name: MATTESON, SHAUNA

Address: 1735 BUFORD HIGHWAY, SUITE 215-410

City-St-Zip: CUMMING, GA 30041

Title:

 Name:
 MOORES, SARA

 Address:
 2309 FOXHAVEN DR W

 City-St-Zip:
 JACKSONVILLE, FL 32224

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: SARA MOORES D 01/06/2010