2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2011
Secretary of State

DOCUMENT# N25506

Entity Name: PGA TOUR WIVES ASSOCIATION, INC.

Current Principal Place of Business:

112 PGA TOUR BOULEVARD
PONTE VEDRA, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

PGA TOUR WIVES ASSOC.
P.O. BOX 74
PONTE VEDRA BCH, FL 32004 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PD
Name: WILSON, AMY
Address: 205 E. BUTTERFIELD RD. #439
City-St-Zip: ELMHURST, IL 60126

Title: VPD
Name: BETTENCOURT, KELLY
Address: 215 NEW CASTLE DRIVE
City-St-Zip: DUNCAN, SC 29334

Title: VPS
Name: HOFFMAN, STACY
Address: 77 PINE BAY COURT
City-St-Zip: LAS VEGAS, NV 89142

Title: VPD
Name: SIMPSON, DOWD
Address: 1312 CANFIELD COURT
City-St-Zip: RALEIGH, NC 27608

Title: VPD
Name: MATTESON, SHAUNA
Address: 1735 BUFORD HIGHWAY, SUITE 215-410
City-St-Zip: CUMMING, GA 30041

Title: D
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 01/07/2011
Electronic Signature of Signing Officer or Director Date