

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33763

FILED  
Mar 10, 2010  
Secretary of State

Entity Name: WORLD GOLF FOUNDATION, INC.

## Current Principal Place of Business:

1 WORLD GOLF PLACE  
ST AUGUSTINE, FL 32092 US

## New Principal Place of Business:

ONE WORLD GOLF PLACE  
ST AUGUSTINE, FL 32092 US

## Current Mailing Address:

1 WORLD GOLF PLACE  
ST AUGUSTINE, FL 32092 US

## New Mailing Address:

ONE WORLD GOLF PLACE  
ST AUGUSTINE, FL 32092 US

FEI Number: 59-2998925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ATTER, HELEN S  
1 WORLD GOLF PLACE  
SAINT AUGUSTINE, FL 32092 US

## Name and Address of New Registered Agent:

SAPORA, JOHN A  
ONE WORLD GOLF PLACE  
SAINT AUGUSTINE, FL 32092 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: JOHN A. SAPORA

03/10/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DC  
Name: STERANKA, JOSEPH  
Address: 100 AVENUE OF THE CHAMPIONS  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: PCEO  
Name: MONA, STEPHEN F  
Address: ONE WORLD GOLF PLACE  
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: EVP  
Name: BARROW, JOSEPH L JR  
Address: ONE WORLD GOLF PLACE  
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: SVP  
Name: PETER, JOHN E  
Address: ONE WORLD GOLF PLACE  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: VP  
Name: MARTIN, KELLY A  
Address: ONE WORLD GOLF PLACE  
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: VP  
Name: LAHTI, BRUCE  
Address: ONE WORLD GOLF PLACE  
City-St-Zip: ST. AUGUSTINE, FL 32092 US

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: JOHN A. SAPORA

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03/10/2010

Electronic Signature of Signing Officer or Director

Date