

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2003 8:00 am
Secretary of State

03-06-2003 90119 043 ***150.00

DOCUMENT # V35114

1. Entity Name
PGA ST. LUCIE, INC.



Principal Place of Business
100 AVENUE OF THE CHAMPIONS
PALM BEACH GARDENS FL 33418

Mailing Address
100 AVENUE OF THE CHAMPIONS
PALM BEACH GARDENS FL 33418

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0394724**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

GARRITY, CHRISTINE M.
100 AVENUE OF THE CHAMPIONS
PALM BEACH GARDENS FL 33418

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME AWTREY, JIM
STREET ADDRESS 100 AVENUE OF THE CHAMPIONS
CITY-ST-ZIP PALM BEACH GARDENS FL 33418 ☐ Delete

TITLE TD
NAME POTTINGER, KIRK
STREET ADDRESS 100 AVE. OF THE CHAMPIONS
CITY-ST-ZIP PALM BCH GARDENS FL ☐ Delete

TITLE S
NAME GARRITY, CHRISTINE M
STREET ADDRESS 100 AVENUE OF THE CHAMPIONS
CITY-ST-ZIP PALM BEACH GARDENS FL 33418 ☐ Delete

TITLE D
NAME DEWING, JAMES R
STREET ADDRESS 100 AVE. OF THE CHAMPIONS
CITY-ST-ZIP PALM BEACH GARDENS FL 33418 ☐ Delete

TITLE D
NAME WHITCOMB, BRIAN
STREET ADDRESS 100 AVENUE OF THE CHAMPIONS
CITY-ST-ZIP PALM BCH GARDENS FL 33418 ☐ Delete

TITLE D
NAME HAINES, JOHN D
STREET ADDRESS 100 AVENUE OF THE CHAMPIONS
CITY-ST-ZIP PALM BEACH GARDENS FL 33418 ☒ Delete

TITLE D
NAME Horrell, Steve
STREET ADDRESS 100 Avenue of the Champions
CITY-ST-ZIP Palm Beach Gardens, FL 33418 ☐ Change ☒ Addition

TITLE D
NAME Gibbs, Joe
STREET ADDRESS 100 Avenue of the Champions
CITY-ST-ZIP Palm Beach Gardens, FL 33418 ☐ Change ☒ Addition

TITLE D
NAME Kohler, Herbert V. Jr.
STREET ADDRESS 100 Avenue of the Champions
CITY-ST-ZIP Palm Beach Gardens, FL 33418 ☐ Change ☒ Addition

TITLE D
NAME Normand, Daye
STREET ADDRESS 100 Avenue of the Champions
CITY-ST-ZIP Palm Beach Gardens, FL 33418 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christine M. Garrity **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-624-8548

CR2E034 (10/02)