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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

V36688

(2)

DOCUMENT #
1. Corporation Name

PGA MANAGEMENT SERVICES, INC.

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2. Principal Place of Business 2a. Mailing Address 2b. Mailing
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Fee Required City & State City & State City & State Zip Country Zip Zip Zip Zip Zip Zip Zip Zi
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Zip Country Zip Country Zip Country Zip Country As This corporation has liability for intangible tax under s 199.032, p. Name and Address of Current Registered Agent 9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 10, Name and Address of New Registered Agent 100 AVENUE OF THE CHAMPIONS PALM BEACH GARDENS FL 33418 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered or or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Landamiliar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature. Upped or private registered agent and stiell approache. 8/DIE Registered Agent Agent Registered Agent Agent Registered Agent Agent Registered Registered Agent Registered Agent Registered Registered Registered Agent Registered Registered Registered Agent Registered Regist
25 29 30
9. Name and Address of Current Registered Agent GARRITY, CHRISTINE M. 100 AVENUE OF THE CHAMPIONS PALM BEACH GARDENS FL 33418 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I an familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature, byted or printed rame of registered agent and stile it auricable. NOTE: Registered Agent To Delete 1 titlle SIRELL 12 NAME 12 NAME 14 AUTHORS. N. PALM BCH. FL. DELETE 1 TITLE DAVENUE GAPORTY CHOISTINE M. DELETE DELETE 2 TITLE SCAPORTY CHOISTINE M.
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CITY-ST-ZIP 6 4 CITY-ST-ZIP 14. 1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Honda Statutes. I furner certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Christine M. Carrity Secretary

3/4/96

(407)624-8548 Daytine Phone # CR2E034 (12