

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25506

Entity Name: PGA TOUR WIVES ASSOCIATION, INC.**Current Principal Place of Business:**112 PGA TOUR BOULEVARD
PONTE VEDRA BEACH, FL 32082**Current Mailing Address:**PGA TOUR WIVES ASSOCIATION
P.O. BOX 74
PONTE VEDRA BEACH, FL 32004 US**FEI Number:** 59-2903646**Certificate of Status Desired:** Yes**Name and Address of Current 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**Officer/Director Detail :**

Title	PRESIDENT
Name	SWAFFORD, KATHERINE
Address	2467 DEMERE ROAD
City-State-Zip:	ST. SIMONS ISLAND GA 31522

Title	VP
Name	KISNER, BRITTANY
Address	832 FERMATA PLACE
City-State-Zip:	AIKEN SC 29801

Title	VP
Name	GAINEY, ERIN
Address	1036 BENTWOOD ROAD
City-State-Zip:	HARTSVILLE SC 29550

Title	DIRECTOR
Name	PERRY, JENNIFER
Address	61 MAGNOLIA BEACH TRAIL
City-State-Zip:	PONTE VEDRA FL 32081

Title	VP
Name	MALNATI, ALICIA
Address	4715 PECANWOOD WAY NW
City-State-Zip:	KNOXVILLE TN 37921

Title	VP
Name	HARRIS, FRANCIE
Address	601 PARK LAKE CIRCLE
City-State-Zip:	BIRMINGHAM AL 35242

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: JENNIFER PERRY**EXECUTIVE DIRECTOR****04/03/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date