

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra E. Mathews
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H77954

(6)

1. Corporation Name

FORWARD PROGRESS, INC.



Principal Place of Business

% KENNETH R. ZENGAGE
201 EAST BOYNTON BEACH BOULEVARD
BOYNTON BEACH FL 33435-3839

Mailing Address

% KENNETH R. ZENGAGE
201 EAST BOYNTON BEACH BOULEVARD
BOYNTON BEACH FL 33435-3839

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

g. Name and Address of Current Registered Agent

ZENGAGE, KENNETH R.
201 EAST BOYNTON BEACH BOULEVARD
BOYNTON BEACH FL

3. Date Incorporated or Qualified
09/26/1985

3a. Date of Last Report
04/10/1995

4. FET Number

59-2591514

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0600 and 607.1400, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0600, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
PD
FISHER, MARY E.
201 E. BOYNTON BEACH BLVD.
BOYNTON BEACH FL

2. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
SD
ZENGAGE, KENNETH R.
201 E. BOYNTON BEACH BLVD.
BOYNTON BEACH FL

3. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
[] DELETE

4. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
[] DELETE

5. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
[] DELETE

6. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
[] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-STATE-ZIP
21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-STATE-ZIP
25. TITLE
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27. STREET ADDRESS
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89. TITLE
90. NAME
91. STREET ADDRESS
92. CITY-STATE-ZIP
93. TITLE
94. NAME
95. STREET ADDRESS
96. CITY-STATE-ZIP
97. TITLE
98. NAME
99. STREET ADDRESS
100. CITY-STATE-ZIP

14. I, the undersigned, certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.04(3)(b), Florida Statutes. I further certify that the information in this report is true and correct, or supplemental or corrigendum, and is not false and misleading, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent or authorized person to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change, if, or on an affidavit with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96 (407) 734-7608

CR2E034 (12/95)