

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000004178

**Entity Name:** PROGRESSIVE CLUB OF THE ISLANDS, INC.

**Current Principal Place of Business:**

3722 COQUINA DR  
SANIBEL, FL 33957

**Current Mailing Address:**

P. O. BOX 898  
SANIBEL, FL 33957 US

**FEI Number: 84-2262582**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SADLER, CHESTER J  
9454 BEGONIA CT  
SANIBEL, FL 33957 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: CHESTER SADLER**

**03/20/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, CHAIRMAN  
Name PACYGA, ANNETTE  
Address 3722 COQUINA DR  
City-State-Zip: SANIBEL FL 33957

Title D, VC  
Name COOK, DIANE  
Address 1010 TROPIC TERRACE  
City-State-Zip: NORTH FT. MYERS FL 33903

Title D, TREASURER  
Name SADLER, CHESTER  
Address 9454 BEGONIA CT  
City-State-Zip: SANIBEL FL 33957

Title D, SECRETARY  
Name HILLIARD, JOANN  
Address 1359 MEDINA DR  
City-State-Zip: FT MYERS FL 33919

Title DIRECTOR  
Name GOLDBERG, ALLISON  
Address 3550 BUNNY LANE  
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR  
Name PARENTE, ELAINE  
Address 760 SEXTON DR UNIT 1032  
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR  
Name WILBUR, MARYANN  
Address 2186 EGRET CIRCLE  
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR  
Name GREEN, RON  
Address 433 LAGOON DR  
City-State-Zip: SANIBEL FL 33957

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*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: CHESTER SADLER**

**MR**

**03/20/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           NOLAN, GINA  
Address        3716 COQUINA DR  
City-State-Zip: SANIBEL FL 33957

Title           DIRECTOR  
Name           LORSCH, HOWARD  
Address        730 NERITA STREET  
City-State-Zip: SANIBEL FL 33957