

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007076

Entity Name: MEASURED PROGRESS, INC.

Current Principal Place of Business:

100 EDUCATION WAY
DOVER, NH 03820

FILED
Mar 05, 2014
Secretary of State
CC2434544497

Current Mailing Address:

PO BOX 1217
DOVER, NH 03821 US

FEI Number: 31-1668672

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name IRBY, ALICE
Address 680 LAKE FOREST DR. SE
City-State-Zip: PINEHURST NC 28374

Title DIRECTOR
Name CATON, DANIEL
Address 100 EDUCATION WAY
City-State-Zip: DOVER NH 03820

Title PRESIDENT, DIRECTOR
Name BORG, MARTIN
Address 100 EDUCATION WAY
City-State-Zip: DOVER NH 03820

Title DIRECTOR
Name COWE, KAREN
Address 100 EDUCATION WAY
City-State-Zip: DOVER NH 03820

Title TREASURER
Name PARSONS, JOHN
Address 100 EDUCATION WAY
City-State-Zip: DOVER NH 03820

Title SECRETARY
Name ELGART, MARK
Address 9115 WESTSIDE PARKWAY
City-State-Zip: ALPHARETTA GA 30009

Title DIRECTOR, VP
Name SWARTZ, RICHARD
Address 100 EDUCATION WAY
City-State-Zip: DOVER NH 03820

Title DIRECTOR
Name KAHL, STUART
Address 100 EDUCATION WAY
City-State-Zip: DOVER NH 03820

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: JOHN PARSONS

CFO

03/05/2014

Electronic Signature of Signing Officer/Director Detail

Date