

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 391431

1. Entity Name
PROGRESS HOMES, INC.



Principal Place of Business
**1515 COUNTRY OAKS BLVD
LAKE WALES, FL 33898 US**

Mailing Address
**1515 COUNTRY OAKS BLVD
LAKE WALES, FL 33898 US**

FILED
06 APR 20 PM 2:40



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02012006 REIN-P CR2E098 (11/05)

4. FEI Number
59-1379921

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KAY, HOWARD
1515 COUNTRY OAKS BLVD.
LK WALES, FL
LAKE WALES, FL 33853**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Howard Kay

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-13-06

DATE

FILE NOW!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
KAY, HOWARD
1515 COUNTRY OAKS BLVD
LK WALES, FL 00000, 33853**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
B 4/21/06

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
KAY, KEVIN
1455 COUNTRY OAKS BLVD.
LAKE WALES, FL 33853**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
REINSTATEMENT

☐ Change

☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
**500073713265
05/02/06--01003--034 **308.75**

☐ Change

☐ Addition

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Howard Kay

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4-13-06

Date

863-676-1991

Daytime Phone #