

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739556

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** PROGRESSIVE ACTION SOCIETY, INCORPORATED

**Current Principal Place of Business:**

835 SYCAMORE ST.  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

835 SYCAMORE ST.  
P.O. BOX 1263  
TITUSVILLE, FL 327811263 US

**New Mailing Address:**

**FEI Number:** 59-2885641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, BARBARA  
5543 OAK HOLLOW DR  
TITUSVILLE, FL 32780 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LAWSON-YOUNG, CHERYL  
Address: 1905 FAIRLANE DRIVE  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: WILLAIMS, HOSEA  
Address: 1785 S EDEN CIR  
City-St-Zip: TITUSVILLE, FL 32780

Title: S  
Name: JOHNSON, GLORIA  
Address: 6690 HUNDRED ACRE DRIVE  
City-St-Zip: COCOA, FL 32927

Title: VP  
Name: SMITH, LEROY  
Address: 814 SYCAMORE STREET  
City-St-Zip: TITUSVILLE, FL 32780

Title: T  
Name: LETT, CLIFFORD  
Address: 1725 COUNTRY LANE  
City-St-Zip: TITUSVILLE, FL 32780

Title: P  
Name: BROWN, BARBARA  
Address: 5543 OAK HOLLOW DR  
City-St-Zip: TITUSVILLE, FL 32780

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: CLIFFORD LETT

T

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date