

2001 UNIFORM BUSINESS REPORT (UBR)

0008213 AF

DOCUMENT # **A95000000303**

1. Entity Name

PROGRESSIVE PUBLISHING, LTD.

Principal Place of Business

C/O J. BOB HUMPHRIES, ESO.
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

Mailing Address

C/O J. BOB HUMPHRIES, ESO.
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

FILED
01 MAR 26 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

2535 SUCCESS DRIVE

3. Mailing Address

2535 SUCCESS DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ODESSA FL

City & State

ODESSA FL

4. FEI Number

59-3303578

Applied For

Not Applicable

Zip

33556

Country

Zip

33556

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HUMPHRIES, J. BOB ESQUIRE
C/O FOWLER, WHITE, ET AL
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name
Richard W. Baker
Street Address (P.O. Box Number is Not Acceptable)
2535 Success Drive

City **Odessa** **FL** Zip Code **33556**

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.

SIGNATURE

Richard W. Baker

Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$99.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P94000033876**
NAME **PROGRESSIVE PUBLISHING, INC.**
STREET ADDRESS **C/O 13577 FEATHER SOUND DRIVE, SUITE 300**
CITY-ST-ZIP **CLEARWATER FL 34622**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Richard W. Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Richard W. Baker

Date

Daytime Phone #

CR2E003 (11/00)