

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000008595

1. Entity Name

PROGRESSIVE MAINTENANCE OF FLORIDA, LLC

Principal Place of Business

432 SAINT ANDREWS BLVD.
NAPLES FL 34113

Mailing Address

432 SAINT ANDREWS BLVD.
NAPLES FL 34113

2. Principal Place of Business

1818 SE 8th PL

3. Mailing Address

1818 SE 8th PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Cape Coral FL

City & State

Cape Coral FL

Zip

33909

Country

Zip

33909

Country

4. FEI Number

65-1033623

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PALLERINO, DONALD E

432 SAINT ANDREWS BLVD.
NAPLES FL 34113

7. Name and Address of New Registered Agent

Name

David G. Daugherty

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

1818 SE 8th PL

City

Cape Coral

FL

Zip Code

33909

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME ☐ Delete

David G. Daugherty
1818 SE 8th PL
Cape Coral, FL 33909

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

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10. ADDITIONS/CHANGES

TITLE NAME ☐ Change ☐ Addition

600003993016--3
-04/12/01--01004--022
*****50.00 *****50.00

TITLE NAME ☐ Change ☐ Addition

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TITLE NAME ☐ Change ☐ Addition

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

David G. Daugherty

3/27/01

Date

941-560-6606

Daytime Phone #

CR2E083 (11/00)