

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90313 011 ****50.00

DOCUMENT # L00000010680

1. Entity Name

THE PROGRESS GROUP, LLC



Principal Place of Business

**C/O JOSEPH W. GUDELSKY, SUITE 300
1080 HOLCOMB BRIDGE ROAD, BLDG. 100
ROSWELL GA 30076**

Mailing Address

**C/O JOSEPH W. GUDELSKY, SUITE 300
1080 HOLCOMB BRIDGE ROAD, BLDG. 100
ROSWELL GA 30076**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **58-2569305**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGRM** ☐ Delete
NAME **COOPER, CATHERINE L**
STREET ADDRESS **641 CAMINO VISTA RIO**
CITY-ST-ZIP **BERNALILLO NM 87004**

TITLE ☒ Change ☐ Addition
NAME **2210 Mirandy Ct, NE**
STREET ADDRESS **Albuquerque, New Mexico**
CITY-ST-ZIP **87122**

TITLE **MGRM** ☐ Delete
NAME **CASS, LESLIE**
STREET ADDRESS **2401 HUBBARD STREET**
CITY-ST-ZIP **GREENSBORO NC 27405**

TITLE ☒ Change ☐ Addition
NAME **Leslie Case**
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete
NAME **PUTERBAUGH, JUDSON**
STREET ADDRESS **14424 S 41ST PLACE**
CITY-ST-ZIP **PHOENIX AZ 85044**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete
NAME **GUERLSKY, JOSEPH W**
STREET ADDRESS **1080 HOLCOMB BRIDGE ROAD BLDG 100 STE 300**
CITY-ST-ZIP **ROSWELL GA 30076**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 REQUIRED

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

1/13/03 770-998-0145

Date

Daytime Phone #

CR2E083 (10/02)