2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L01000016095

1. Entity Name
PROGRESSIVE BUILDERS, L.L.C.

Principal Place of Business	Mailing Address
2248 STATE RD 44	2248 STATE RD 44
NEW SMYRNA BEACH, FL 32168	NEW SMYRNA BEACH, FL 32168

DO NOT WRITE IN THIS SPACE

03052005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
27-0004648	Not Applicable

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

6. Name and Address of Current Registered Agent

WILLIAMS, DALE L
2240 STATE RD 44
NEW SMYRNA BEACH, FL 32168

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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

Filing Fee is $50.00
Due by May 1, 2005

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	WILLIAMS, DALE L
STREET ADDRESS	148 BREEZEWAY CT
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32169
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
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CITY-ST-ZIP	

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04/01/05-80044-006 50.00

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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, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #