2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # LO2000005604



FILED Apr 24, 2003 8:00 am Secretary of State

1. Entity Name PROGRESSIVE MANAGEMENT GROUP, LLC									04	l-24 - 20	03 9010	01 001 **	*100).00	
Principal Place of Business Mailing Address															
6325 PRESIDEN FORT MYERS F US			PO BOX 60195 FORT MYERS FL 33906-6195				4.500		JB41 8 044 4 4		41 00:01 01:10				
			· · · · · · · · · · · · · · · · · · ·												
2. Principal P	lace of Busin	ness	3. Mailing	3. Mailing Address								ii yy idi biii a i			
Suite, Apt. #, etc.			Suite, A	Suite, Apt. #, etc.			1		☐ CHE	ECK HER	E IF MAK	ING CHAN	GES		_
City & State	е		City & S	City & State									olied For Applicable	1	
Zip Country			Zip	Zip Cour			E. Cartificate of Status Desired \$5.1				\$5.00 Fee Re	Addi quired	tional	-	
. 	6. Name	and Address of Cu	irrent Registered A	Agent	1			7. Name a	nd Addres	s of New	Register	ed Agent			1
WAY	(LAND. TEE	RY R JR			•	Name	TE	6	Wa	yla	nd				
WAYLAND, TERRY R JR 817 SORRENTO PLACE						Street A	et Address (P.O. Box Number is Not Acceptable)			•					
NOK	(OMIS FL 3	4275				1482	00	rusta	J. Cor	FO 3	#~	703		_	
						City —	105	7 7	INEC		_	L Zip	Code	19	
	named entitions of regist	y submits this staten	nent for the purpose	of changing its	s registere	ed office or	registere	d agent, or	ooth, in the	State of I	Florida. 1.	am familiar	with, a	ind accept	
SIGNATURE -	ISC	un Wa	>	<u> </u>	TEr		Ma	ylar	19		<u>ಎ - ತಿ</u>	10-2	<u>00</u>	<u>3</u>	
	Signature, typed	or printer name of registere	d agent and title if applicab	ole. (NOT	E: Registered	d Agent signatu	ure required t	when reinstating)			DA	TE			
									1						1
			Make 6	Check Payab	le to Flo	-	partmen	t of State				·			
				Check Payab Du	le to Flo e By Ma		partmen	t of State		DDITION	S / C LIAN	256			
9.	MGRM	MANAGING M	Make (Check Payab Du	le to Flo e By Ma	orida Dep ay 1, 2003	partmen 3				S/CHAN	Cha	inge	Addition	100
9. TITLE NAME	MGRM WAYLAN	MANAGING M D, TERRY R JR		Check Payab Du	e By Ma	orida Dep ay 1, 2003	partmen 3					Cha	inge	☐ Addition	140,000
TITLE NAME STREET ADDRESS	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du	le to Flore By Ma	orida Dep ay 1, 2003	partmen 3					Cha	inge	Addition	40/00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WAYLAN 817 SOR	D, TERRY R JR		Check Payab Du ERS	le to Flo e By Ma 10. TITLE NAMI STRE CITY	prida Depay 1, 2003 E E E E E E E E T T T T T T T T T T T	partmen 3	t of State				#703	3		DOTOGO (10/00)
TITLE NAME STREET ADDRESS	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du	le to Flore By Ma	e E E E E E E E E E E E E E E E E E E E	partmen 3					Cha	3	Addition Addition	ODOLOGO (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS	I 10. TITLE NAMI STRE CITY TITLE NAMI STRE TITLE	e E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr 7 my				#703	3		000000000000000000000000000000000000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	ID. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY CITY CITY CITY CITY CITY CITY CITY	E E E E E E E E E E E E E E E E E E E	partmen 3					Cha	unge	☐ Addition	000000000000000000000000000000000000000
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS	I TITLE AMM TITLE NAMI STRE CITY: TITLE NAMI STRE CITY: TITLE TITLE TITLE TITLE TITLE TITLE	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				#703	unge		000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	ID. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI NAMI NAMI NAMI NAMI NAMI NAMI NAMI	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	unge	☐ Addition	100/01/00000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	TITLE NAME STREE CITY. TITLE NAME STREE CITY. TITLE NAME STREE CITY.	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	Inge	Addition	70/07/000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	TITLE NAMM STRE CITY	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	Inge	☐ Addition	000000000000000000000000000000000000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	TITLE NAMM STRE CITY	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	Inge	Addition	20/01/ 0001000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	I to Fice By Ma 10. TITLE NAMI STRE CITY TITLE NAMI STRE	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	linge	Addition Addition	700000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete	I TITLE NAMI STRE CITY: TITLE TITLE NAMI STRE CITY: TITLE TITLE TITLE NAMI STRE CITY: TITLE TI	E E E E ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E T ADDRESS - ST-ZIP E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	linge	Addition	100001
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete Delete	ID. TITLE NAMI STRE CITY:	E E E E E ADDRESS - ST- ZIP E E E E E T ADDRESS - ST- ZIP E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	linge	Addition Addition	10000110000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete Delete	I TITLE NAMI STRE CITY	E E E E ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E T ADDRESS - ST-ZIP E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E T ADDRESS - ST-ZIP E E E E E E T ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	linge	Addition Addition	7000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete Delete	I TITLE NAMI STRE CITY	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	inge	Addition Addition	(0)01) 0001000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WAYLAN 817 SOR	D, TERRY R JR RENTO PLACE		Check Payab Du ERS Delete Delete Delete Delete	I TITLE NAMI STRE CITY	E E E E E E E E E E E E E E E E E E E	partmen 3	ao Cr t my				Cha	inge	Addition Addition Addition	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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.