

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000006816

1. Entity Name
PROGRESSIVE FLOORS, LLC

FILED
Feb 24 2000 8:00 am
Secretary of State

Principal Place of Business
9734 U.S. 19
PORT RICHEY FL 34668

Mailing Address
9734 U.S. 19
PORT RICHEY FL 34668



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0957392

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

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

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
GEDGIO, CHRISTY
9734 U.S. 19
PORT RICHEY FL 34668

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
mf 3/6/00

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
BEDGIO, NANETTE
9734 U.S. 19
PORT RICHEY FL 34668

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
100003162061--9
-03/08/00--01045--009
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☐ Change ☐ Addition

TITLE
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TITLE
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STREET ADDRESS
CITY- ST- ZIP

☐ 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:

CHRISTY GEDGIO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

1-13-00

Daytime Phone #

727-849-5200

CR2E083 (9/99)