

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 21 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N00000004464**

1. Corporation Name

PROGRESSIVE SCHOOLS, INC.

REINSTATEMENT 07



200023967842

10/21/03--01053--020 ***61.25

Principal Place of Business

Mailing Address

742 ARAGON AVE NE
PALM BAY FL 32905

742 ARAGON AVE NE
PALM BAY FL 32905

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

07/06/2000

Suite, Apt. #, etc.

-Suite, Apt. #, etc.

5. FEI Number

59-3634988

☒ Applied For

☐ Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	PALMIERI, TONY	742 ARAGON AVE NE	PALM BAY FL 32905
D	VASUDEVAN, VASUMATHI	738 CORONA AVE NW	PALM BAY FL 32907
D	CYR, APRIL	999 HOSBINE ST SE	PALM BAY FL 32909
D	NICKERSON, SCOTT	651 ACACIA AVE	MELBOURNE VILLAGE FL 32904
D	DHARMAPREMANANDA AVT, ACARYA	3157 COUNTY RD 1670	WILLOW SPRINGS MO 65793

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PALMIERI, TONY
742 ARAGON AVE NE
PALM BAY FL 32905

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

For Palmieri
SIGNATURE REQUIRED

Date 10/9/03

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

For Palmieri
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/9/03

Date

(321) 727-0880

Daytime Phone #

CR2E040 (7/03)

To Dept of State

Our UBR was not received for 2003. We apologize for not writing you to receive the form earlier. Enclosed is the Application for reinstatement and \$61.25 for our annual report fee.

Sincerely

Tony Palmieri
President and Registered Agent for Progressive Schools Inc.