2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004087

FILED Jan 12, 2009 Secretary of State

Entity Name: PROGRESSIVE BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

266B YONGE ST. 873 HULL ROAD

ORMOND BCH, FL 32174 UNIT 12 ORMOND BCH, FL 32174

Current Mailing Address: New Mailing Address:

266B YONGE ST. 873 HULL ROAD

ORMOND BCH, FL 32174 UNIT 12

ORMOND BCH, FL 32174

FEI Number: 26-0523996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KIMBLE, JACK H
266B YONGE ST.
KIMBLE, JACK H
873 HULL ROAD

ORMOND BCH, FL 32174 US UNIT 12 ORMOND BCH, FL 32174 US

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: 01/12/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 KIMBLE, JACK H
 Name:
 KIMBLE, JACK H

 Address:
 266B YONGE ST.
 Address:
 20 DEERSKIN LANE

 City-St-Zip:
 ORMOND BCH, FL 32174
 City-St-Zip:
 ORMOND BCH, FL 32174

Title: VTD () Delete Title: VTD (X) Change () Addition Name: KIMBLE, DANIEL E Name: KIMBLE, DANIEL E

Address: 266B YONGE ST. Address: 6 CHINA MOON DRIVE
City-St-Zip: ORMOND BCH, FL 32174 City-St-Zip: ORMOND BCH, FL 32174

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 KIMBLE, SARANNE E
 Name:
 KIMBLE, SARANNE E

 Address:
 266B YONGE ST.
 Address:
 20 DEERSKIN LANE

 City-St-Zip:
 ORMOND BCH, FL 32174
 City-St-Zip:
 ORMOND BCH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARANNE E KIMBLE MGMR 01/12/2009