FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State .

DIVISION OF CORPORATIONS

N94000002645 (9) DOCUMENT

PROGRESSIVE MEN'S CLUB, INC.

Principal Place of Business	Mailing Add
	4045 0113



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SECREMAN OF SIME

Principal Place of Business Mailing Address										
1345 SUZANA MONTICELLO			INNA DRIVE LO FL 32344							
						3. Date Incorpo 05/26	rated or Qualified		e of Last Report 05/01/1995	
2. Principal Pla	ace of Business	2a. Mailing A	2a. Mailing Address 26			LIOT ABOUT ABOUT			Applied For Not Applicable	
Suite, Apt. 4	#, etc.	Suite, Ar	ot. #, etc.			5. Certificate of	Status Desired		\$8.75 Additional Fee Required	
City & State						on Campaign Financing S.00 May Be Fund Contribution Added to Fees				
Zip	Country 25	Zip 29	Country 30			8. This corporation has tiability for intangible tax under s. 199 032, Florida Statutes Yes No				
9. Name and Address of Current Registered Agent 10						10. Name and	10. Name and Address of New Registered Agent			
HALL, STEVE 1345 SUZANNA DRIVE MONTICELLO FL 32344			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83							
				84	City			FL	85 Zip Code	
or register	to the provisions of Sections 617.050 red agent, or both, in the State of Flo th, and accept the obligations of, Sec	rida. Such change	was authorized by th	bove-r	named corpo oration's boa	ration submits this s ird of directors. Ther	tatement for the purp eby accept the appoi	ose of cha ntment as	inging its registered office registered agent. I am	
SIGNATURE	Signature typed or printed name of registered age	int and lifte it applicable	(NOTE Registe	ered Agen	t signature require	ad when reinstating)		DATE		
12. OFFICERS AND DIRECTORS 13.				3.		ADDITIONS	CHANGE'S TO OFFIC			
TITLE	Р		DELETE 1	1 TITLE	1		3 - c. h co.	akc [Change Addition	
NAME	SEABROOKS, LEROY JR.		1.	2 NAME	*	٠٤٠ نام		L		
STREET ADDRESS	740 PINE STREET		1:	a street	ADDRESS	140 Pir	seubro	وحو		
CITY - ST - ZIP	MONTICELLO FL 32344		1	4 CITY - S	T-ZIP	4ontic	ello p F (_,	1 rusTEES	
2, 0. 2			Judy etc	4 7.7. 6				- 1	Change Addition	

TITLE DEFELE STGUE HALL, STEVE 22 NAME NAME 1345 SUZANNA DRIVE 2.3 STREET ADDRESS STREET ADDRESS Irus EES MONTICELLO FL 32344 2 4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 3 1 TITLE TITLE ULEE, AARON A JR. 3.2 NAME NA POST OFFICE BOX 52AA N/A 3.3 STREFT ADDRESS STREET ADDRESS MONTICELLO FL 32344 3 4 CITY - ST-ZIP CITY-ST-ZIP DELETE 4 1 TITLE TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5 t TITLE TITLE 100001896371 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CiTY - ST - ZiP CITY-ST-ZIP DELETE 6 1 TITLE TITLE 62 NAME NAME 63 STREET ADDRESS

64 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on, an attachment with an address. CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

March 31,95