

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N97000000705

1. Entity Name

PROGRESSIVE NORTHWEST NEIGHBORHOOD  
ASSOCIATION, INC.



**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

Principal Place of Business

1444 8TH STREET  
WEST PALM BEACH FL 33401

Mailing Address

1444 8TH STREET  
WEST PALM BEACH FL 33401

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUSH, EDITH C  
1444 8TH STREET  
WEST PALM BEACH FL 33401

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. I am familiar with, and accept the obligations of registered agent

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 \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D ☐ Delete  
BUSH, EDITH C  
1444 8TH STREET  
WEST PALM BEACH FL 33401

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D ☐ Delete  
KING, KARL  
512 -42ND ST  
WEST PALM BEACH FL 33407

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D ☐ Delete  
NEAL, LELIA  
1442 8TH STREET  
WEST PALM BEACH FL 33401

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D ☐ Delete  
CUMMINGS, IDA  
P.O. BOX 3721  
WEST PALM BEACH FL 33402-3721

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D ☐ Delete  
MOORE, ALICE E DR  
801 4TH STREET  
WEST PALM BEACH FL 33401

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition  
000000632312  
02/21/07-80017-016 61.25

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edith C. Bush / Edith C. Bush

Jan.  
31, 2007

561-  
882-4682

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #