2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000095308

1. Entity Name

PROGRESSIVE MEDIA COMMUNICATIONS, INC.



FILED Apr 23, 2005 08:00 AM Secretary of State

Principal Place of Business

127 W. FAIRBANKS AVE. #284 WINTER PARK, FL 32789

Mailing Address

127 W. FAIRBANKS AVE. #284 WINTER PARK, FL 32789



DO NOT WRITE IN THIS SPACE

 04202005
 No Chg-P
 CR2E034 (10/03)

 4. FEI Number
 Applied For

59-3676542

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THORN, W. THOMPSON III 101 E. KENNEDY BLVD., SUITE 2800 TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the points of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
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 \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYCAN, NANCY 127 W. FAIRBANKS AVE. #284 WINTER PARK, FL 32789		U00000325816 04/23/05-80033-003 150.00 DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRADDOCK <u>, J</u> OHN 127 W. FAIRBANKS AVE. #284 WINTER PARK, FL 32789					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. 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 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 607, 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:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-05 407-822-8922

Date Daying Phone 4