

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90255 023 ***150.00

DOCUMENT # P92000010713

1. Corporation Name

PROGRESSIVE HOMES, INC.

Principal Place of Business

15820 CHIEF COURT
FORT MYERS FL 33912

Mailing Address

15820 CHIEF COURT
FORT MYERS FL 33912

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1992

4. FEI Number

65-0371696

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 17222 ALICO CENTER RD

Suite, Apt. #, etc.

22 SUITE 1

City & State

23 FT. MYERS, FL

Zip

24 33912

Country

25 USA

2a. Mailing Address

26 17222 ALICO CENTER RD

Suite, Apt. #, etc.

27 SUITE 1

City & State

28 FT. MYERS, FL

Zip

29 33912

Country

30 USA

9. Name and Address of Current Registered Agent

PAUL, TERRANCE A
15820 CHIEF COURT
FORT MYERS FL 33912

10. Name and Address of New Registered Agent

81 Name PAUL, TERRANCE A

82 Street Address (P.O. Box Number is Not Acceptable)
17222 ALICO CENTER RD

83 SUITE 1

84 FT. MYERS

FL

85 Zip Code 33912

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: TERRANCE A. PAUL

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered agent signature required when reinstating)

4-23-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST
NAME PAUL, TERRANCE A
STREET ADDRESS 15820 CHIEF COURT
CITY-ST-ZIP FORT MYERS FL 33912

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVST
1.2 NAME PAUL, TERRANCE A
1.3 STREET ADDRESS 17222 ALICO CENTER RD, SUITE 1
1.4 CITY-ST-ZIP FT. MYERS, FL 33912

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on any attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-99

Date

941-267-4003

Daytime Phone #

CR2E034 (11/98)