2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000025053

1. Entity Name

PROGRESSIVE BUILDING MAINTENANCE, INC.



Jan 21, 2004 08:00 AM Secretary of State

Principal Place of Business

2408 WOODBROOK CT ORLANDO, FL 32837 Mailing Address

2408 WOODBROOK CT ORLANDO, FL 32837



DO NOT WRITE IN THIS SPACE

01132004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3167932

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

JONES, LOWELL D 2408 WOODBROOK CT. ORLANDO, FL 32837

DO NOT WRITE IN THIS SPACE

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, typod or printed name of registered agent and one if applicable. (REUTE. Registered Agent signature required when reinstafring):						
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financing Trust Fund Commitbution. Added to Fees				
10. OFFICERS AND DIRECTORS				 -	<u> </u>	
STREE NAME STREET ADDRESS CHY-ST-ZIP	P JONES, NANCY M 2408 WOODBROOK CT. ORLANDO, FL 32837				000000009380 01/21/04-80009-008 150.00	
TITLE MAME STREET ADDRESS CRY-ST-ZIP	ST JONES, LOWELL D 2408 WOODBROOK CT. ORLANDO, FL 32837					
THILE NAME STREET AUDITESS CITY-ST-ZEP	V JONES, LOWELL S 3040 SW 177 LN RD OCALA, FL 34473		DO NOT WRITE IN THIS SPACE			
NAME SIREET ADDRESS CITY-SI-ZIP	V JONES, DIANE R 3040 SW 177 LN RD OCALA, FL 34473					
TITLE NAME STITLET ADDRESS CITY-ST-ZIP TITLE						

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 507, 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: 1

STREET ADDRESS

TYPED ON PRINTED HAME

Dione Jone

1-13-04

407.856.9331