


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 05, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000025053	
1. Entity Name PROGRESSIVE BUILDING MAINTENANCE, INC.	

Principal Place of Business 2408 WOODBROOK CT ORLANDO, FL 32837	Mailing Address 2408 WOODBROOK CT ORLANDO, FL 32837
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01282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3167932	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JONES, LOWELL D 2408 WOODBROOK CT. ORLANDO, FL 32837
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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 \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1000000216314 02/05/05-80043-024 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JONES, NANCY M 2408 WOODBROOK CT. ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST JONES, LOWELL D 2408 WOODBROOK CT. ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V JONES, LOWELL S 3040 SW 177 LN RD OCALA, FL 34473
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V JONES, DIANE R 3040 SW 177 LN RD OCALA, FL 34473
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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: Diane Jones **Diane Jones** **1-30-05** **407-856-9331**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #