

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

FILED

Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000044135 (9)

1. Corporation Name  
PROGRESSIVE MANAGEMENT CONCEPTS INC.



Principal Place of Business

Mailing Address

360 S. STATE ROAD 434, SUITE 1004-267  
ALTAMONTE SPRINGS FL 32714

675 OAK HOLLOW WAY  
ALTAMONTE SPRINGS FL 32714-1841  
US

3. Date Incorporated or Qualified

06/14/1994

3a. Date of Last Report

03/08/1996

2. Principal Place of Business

2a. Mailing Address

21 499 S.E. 434 Suite 2155

26 Suite, Apt. #, etc.

22 Altamonte Springs Fl.

27 City & State

23 32714

28 Zip

24 32714

29 Country

25 US

30 Country

4. FEI Number

59-3249529

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAMPE, MARY JANE  
675 OAK HOLLOW WAY  
ALTAMONTE SPRINGS FL 32714

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and fee, if applicable (NOTE: Registered Agent's signature required when reinstating)

4/25/97

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P KAMPE, MARY J 675 OAK HOLLOW WAY ALTAMONTE SPRINGS FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V RICHARDS, BRUCE 811 HARROW COURT GAHANNA OH 43230

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ST KAMPE, RAY G 675 OAK HOLLOW WAY ALTAMONTE SPRINGS FL 32714

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TREASURER

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

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

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

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

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

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

14. I do 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 an attachment with an address.

SIGNATURE

Mary Jane Kampe, President

4/25/97 4072973311

CR2E034 (9/96)