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May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000057785 (3)

1. Corporation Name
PROGRESSIVE TELECOMMUNICATIONS CORP.



Principal Place of Business

Mailing Address

704 BIG TREE DR
STE 102
LONGWOOD FL 32750
US

P.O. BOX 520334
#126
32752000 FL 32771
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 601 CLEVELAND ST

2a. Mailing Address

26 601 CLEVELAND ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 930

27 SUITE 930

City & State

City & State

23 CLEARWATER, FL

28 CLEARWATER, FL

Zip

Country

Zip

Country

24 33755

25 USA

29 33755

30 USA

9. Name and Address of Current Registered Agent

SHEVLIN, BARRY
704 BIG TREE DR
STE 102
LONGWOOD FL 32760

3. Date Incorporated or Qualified

07/08/1996

4. FEI Number

59-3402169

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name SHEVLIN, BARRY
82 Street Address (P.O. Box Number is Not Acceptable)
601 CLEVELAND ST
83 SUITE 930
84 City CLEARWATER FL 85 Zip Code 33755

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 *Barry Shevlin*

Signature typed in print of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME THOMPSON, ROBERT
STREET ADDRESS 2499 OLD LAKE MARY RD, #126
CITY-ST-ZIP SANFORD FL 32771 ☐ DELETE

TITLE D
NAME SHEVLIN, BARRY
STREET ADDRESS 2499 OLD LAKE MARY RD, #126
CITY-ST-ZIP SANFORD FL 32771 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME THOMPSON, ROBERT
1.3 STREET ADDRESS 1121 SETTLERS LOOP
1.4 CITY-ST-ZIP GENEVA, FL 32732

2.1 TITLE D ☒ Change ☐ Addition
2.2 NAME SHEVLIN, BARRY
2.3 STREET ADDRESS 1050 STARKEY ROAD #506
2.4 CITY-ST-ZIP LARGO, FL 33771

3.1 TITLE P ☐ Change ☒ Addition
3.2 NAME BARRY, GREENWOOD
3.3 STREET ADDRESS 1591 GULF BLVD
3.4 CITY-ST-ZIP CLEARWATER, FL 33767

4.1 TITLE V ☐ Change ☒ Addition
4.2 NAME DR. HOWARD TACKETT
4.3 STREET ADDRESS 1591 GULF BLVD
4.4 CITY-ST-ZIP CLEARWATER, FL 33767

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

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

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 an attachment with an address.

SIGNATURE: *Barry Shevlin* Barry Shevlin. 12/1/98 (913) 444-9898

CR2E034 (10/97)