**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700055633

1. Corporation Name

PROGRESSIVE AUTO STORAGE, INC.

Principal Place of Business

Mailing Address

740 BALD EAGLE DRIVE MARÇO ISLAND FL 34145 740 BALD EAGLE DRIVE MARCO ISLAND FL 34145

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90084 018 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

				06/24/1997	
2. Principal P	lace of Business	2a. Mailing Address	Carios	4. FEI Number	Applied For
21 720	BAID GAGLE DRIVE		GATIE DU	59-3458827	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	1 1 1	City & State  28 MARCO INLAND	, 71	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3 4 (1	Country	29 74145 30	Country Country	This corporation owes the current year Interpretation     Personal Property Tax.	angible □Yes <b>X</b> No
,	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
			81 Name		
KELLY, MICHAEL R				Iddaes / D.O. Boy Number is Not Acceptable)	
1218 TREASURE COURT			82 Street A	Address (P.O. Box Number is Not Acceptable)	
MARCO ISLAND FL 34145			83		
			84 City	FI	85 Zip Code
				· · · · · · · · · · · · · · · · · · ·	changing its registered
office or r	to the provisions of Sections 607,0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was autho	rized by the corpo	corporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoin	ntment as registered
SIGNATURE		(NOTE D	istered Agent signature re	guired when reinstating) DATE	
	Signature, typed or printed name of registered agent		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 12
12.	OFFICERS AND	DELETE		ABBITIONS/CITANGES TO OTT ICENS AN	Change Addition
TITLE	PD	BEEE 1E	1.1 TITLE		
NAME	KELLY, MICHAEL R		1.2 NAME	•	
STREET ADDRESS	1218 TREASURE COURT	l	1.3 STREET ADDRESS		
CITY-ST-ZIP	MARCO ISLAND FL 34145		1.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	KELLY, LISA M		2.2 NAME		
STREET ADDRESS	8023 PANTHER TRAIL #902		2.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34113	Ī	2.4 CITY-ST-ZIP		
TITLE	1777 EEO 1 E 04 1 10	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
			3.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		[] DELETE			
NAME			4, 2 NAME		
STREET ADDRESS		i	4.3 STREET ADDRESS		
CITY-ST-ZIP	· .		4.4 CITY-ST-ZIP		
TITLE	•	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS		Į.	5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
			6.4 CITY-ST-ZIP		
CITY-\$T-ZIP			0.7 GH 1-31*AIF	- Casting 140 07/2/2) Florido Statutos I further opp	tify that the information

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 informationated 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, with all other like empowered.

941 641 4944 Daytime Phone #