

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000014413

1. Entity Name

PROGRESSIVE LEASING, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90113 001 *1,905.00

Principal Place of Business

Mailing Address

200 E ROBINSON ST. STE 450
ORLANDO FL 32801

200 E ROBINSON ST. STE 450
ORLANDO FL 32801-1989

2. Principal Place of Business

10125 W. COLONIAL DR.

3. Mailing Address

10125 W. COLONIAL DR.

Suite/Apt. #, etc.

212

Suite/Apt. #, etc.

212

City & State

OCLOEE, FLORIDA

City & State

OCLOEE, FL.

Zip

34761

Country

USA

Zip

34761

Country

USA

4. FEI Number

59-3493237

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAMILLO, JOSEPH
200 E ROBINSON ST
SUITE 450
ORLANDO FL 32801

Name

JOSEPH Camillo

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

10125 W. COLONIAL DR.

Suite 212

City

OCLOEE

FL

Zip Code

34761

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.

SIGNATURE

Joseph Camillo

Signature, typed or printed name of registered agent and title if applicable

Joseph Camillo

(NOTE: Registered Agent signature required when reinstating)

3/28/00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME WILKINSON, PAMELA J
STREET ADDRESS 9152 BALMORAL MEW SQ.
CITY-ST-ZIP WINDERMERE FL 34786 ☐ Delete

TITLE P/D
NAME PAMELA J. WILKINSON ☒ Change ☐ Addition
STREET ADDRESS 6030 GREATWATER DR.
CITY-ST-ZIP WINDERMERE, FL. 34786

TITLE VD
NAME LANGLEY O'DERRICK, SHEILA
STREET ADDRESS 1241 FOX DEN RD
CITY-ST-ZIP WINTER PARK FL 32712 ☐ Delete

TITLE VD
NAME SHEILA LANGLEY O'DERRICK ☒ Change ☐ Addition
STREET ADDRESS 1303 SWEETWATER CLUB BLVD.
CITY-ST-ZIP LONGWOOD, FL. 32779

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PAMELA J. WILKINSON/PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAMELA J. WILKINSON

Date

Daytime Phone #

3/28/00 407-822-3664

CR2E034 (9/99)