2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000104716

FILED Apr 28, 2005 Secretary of State

Entity Name: PROGRESSIVE DRIVER SERVICES OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business: 1905 CORPORATE SQUARE BLVD. JACKSONVILLE, FL 32216 **Current Mailing Address: New Mailing Address:** P.O. BOX 17775 JACKSONVILLE, FL 32245 FEI Number: 59-3546759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FAWBUSH, ANDREW J 50 N.LAURA ST., SUITE 2800 JACKSONVILLE, FL 32202 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HARMON, DOUG Name: Name: HARMON, DOUG 8246 RIDING CLUB RD. 11981 SUMMER ROSE COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32219 VD Title: Title: () Delete () Change () Addition Name: WHALEY, GARLAND G Name: 9386 JONES ROAD Address: Address: JACKSONVILLE, FL 32225 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition KRITZMAN, LESLIE G Name: Name: 11142 RIFLE RUN RD. Address: Address: JACKSONVILLE, FL 32225 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition HIRTE, JOHN R Name: Name: Address: 2152 SPINNING WHEEL LANE Address: City-St-Zip: CINCINNATI, OH 45244 City-St-Zip: Title: STD () Delete Title: STD (X) Change () Addition Name: HARMON, LINDA L Name: HARMON, LINDA L 8246 RIDING CLUB RD. Address: 11981 SUMMER ROSE COURT Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32219

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUG HARMON PRES 04/28/2005