

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90212 031 ***185.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000058007 1. Entity Name PGR REALTY GROUP, INC.			
Principal Place of Business 322 BANYAN BLVD. WEST PALM BEACH, FL 33401		Mailing Address P.O. BOX 4961 ORLANDO, FL 32802	
2. Principal Place of Business 422 7th Street Suite, Apt. #, etc. Suite 2 City & State West Palm Bch., FL Zip 33401		3. Mailing Address 422 7th Street Suite, Apt. #, etc. Suite 2 City & State West Palm Bch., FL Zip 33401	
4. FEI Number 65-0928881		☐ CHECK HERE IF MAKING CHANGES Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		7. Name and Address of New Registered Agent Name Paula J. Ryan Street Address (P.O. Box Number is Not Acceptable) 422 7th Street, Suite 2 City West Palm Beach, FL Zip Code 33401	
6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 N. ORANGE AVENUE, STE. 1100 ORLANDO, FL 32801			
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 4/23/03 (NOTE: Registered Agent's signature required when installing)			
FILE NOW!!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYAN, PAULA 322 BANYAN BLVD. WEST PALM BEACH, FL 33401	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RYAN, H. GENE 322 BANYAN BLVD. WEST PALM BEACH, FL 33401	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.			
SIGNATURE:		Date 4/23/03 Signature Phone # 561 938 8886	

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