

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M81153

Entity Name: PROGRESS CAPITAL HOLDINGS, INC.**Current Principal Place of Business:**550 S. TRYON STREET
DEC 45A
CHARLOTTE, NC 28202**Current Mailing Address:**550 S. TRYON STREET
DEC 45A
CHARLOTTE, NC 28202**FEI Number:** 59-2910519**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	DIRECTOR
Name	GOOD, LYNN J
Address	550 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	OTHER
Name	DE MAY, STEPHEN G
Address	550 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	AT
Name	SULLIVAN, JOHN L.
Address	550 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	AS
Name	WRIGHT, NANCY M
Address	550 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	TREASURER
Name	DE MAY, STEPHEN G
Address	550 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

I hereby 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 all other like empowered.

SIGNATURE: NANCY M. WRIGHT**ASSISTANT SECRETARY** 03/16/2016_____
Electronic Signature of Signing Officer/Director Detail_____
Date