

1.) CORPORATION NAME:

Progressive Medical, Inc.

DUE DATE: **7/31/2011**

SCC ID NO: **F1759689**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
NATIONAL REGISTERED AGENTS, INC.
4001 North Ninth Street, Suite 227
ARLINGTON, VA 22203**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 250 PROGRESSIVE WAY

CITY/ST/ZIP: WESTERVILLE, OH 43082-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: KEVIN BANION
TITLE: PRESIDENT
ADDRESS: 250 PROGRESSIVE WAY
CITY/ST/ZIP/CO: WESYERVILLE, OH 43082-

OFFICER DIRECTOR

NAME: DAVID DECLARK
TITLE: TREASURER
ADDRESS: 250 N SUNNY SLOPE RD
CITY/ST/ZIP/CO: BROOKFIELD, WI 53005-

OFFICER DIRECTOR

NAME: DAN GIFFORD
TITLE: ASST TREASURER
ADDRESS: 250 PROGRESSIVE WAY
CITY/ST/ZIP/CO: WESTERVILLE, OH 43082-

OFFICER DIRECTOR

NAME: JULIA A JENSEN
TITLE: SECRETARY
ADDRESS: 250 N SUNNY SLOPE RD
CITY/ST/ZIP/CO: BROOKFIELD, WI 53005-

OFFICER DIRECTOR

NAME: KRIS BLOMMEL
TITLE: CONTROLLER
ADDRESS: 250 N SUNNY SLOPE RD
CITY/ST/ZIP/CO: BROOKFIELD, WI 53005-

OFFICER DIRECTOR

NAME: KEN DOWD, JR TITLE: DIRECTOR ADDRESS: 250 N SUNNY SLOPE RD CITY/ST/ZIP/CO: BROOKFIELD, WI 53005-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DAN GIFFORD	DAN GIFFORD, ASST TREASURER	6/1/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.