

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005127

FILED
Apr 23, 2008
Secretary of State

Entity Name: PROVIDENCE MANAGEMENT AND DEVELOPMENT COMPANY, INCORPORATED

Current Principal Place of Business:

18601 NORTH CREEK DRIVE
TINLEY PARK, IL 60477

New Principal Place of Business:

Current Mailing Address:

18601 NORTH CREEK DRIVE
TINLEY PARK, IL 60477

New Mailing Address:

FEI Number: 36-3774205 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARIAN PEARLMAN NEASE, ESQ.
2500 N. MILITARY TRAIL, SUITE 480
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: MUDDE, JACK
Address: 12211 S. HARLEM
City-St-Zip: PALOS HEIGHTS, IL 60463

Title: C () Delete
Name: HOVING, KENNETH
Address: 363 TRINITY LANE
City-St-Zip: OAK BROOK, IL 60423

Title: T () Delete
Name: DEGROT, DOUG
Address: 10761 ASHFORD
City-St-Zip: FRANKFORT, IL 60423

Title: D () Delete
Name: NELSON, KURT
Address: 14436 ASHLEY COURT
City-St-Zip: ORLAND PARK, IL 60462

Title: P () Delete
Name: SCHUTT, RICHARD
Address: 434 SHADOW CREEK DRIVE
City-St-Zip: PALOS HEIGHTS, IL 60462

Title: S () Delete
Name: VAN ECK, ROY
Address: 1415 WEST 55TH STREET
City-St-Zip: COUNTRYSIDE, IL 60525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN R. RUSSELL

Electronic Signature of Signing Officer or Director

ATT

04/23/2008

_____ Date