

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P14565

1. Entity Name
PROVIDENT HOLDING CORPORATION



Principal Place of Business
**1415 TIMBERLANE ROAD
#123
TALLAHASSEE, FL**

Mailing Address
**1415 TIMBERLANE ROAD
#123
TALLAHASSEE, FL**

FILED

04 APR 23 AM 11:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



04192004 No Chg-P CR2E034 (10/03) **dy**

4. FEI Number
59-2771986

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RICHTER, LUTHER J
1415 TIMBERLANE ROAD
TALLAHASSEE, FL**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RICHTER, JILL D
STREET ADDRESS	1415 TIMBERLANE ROAD
CITY - ST - ZIP	TALLAHASSEE, FL
TITLE	VTS
NAME	RICHTER, LUTHER J
STREET ADDRESS	1415 TIMBERLANE ROAD
CITY - ST - ZIP	TALLAHASSEE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000035723510
05/06/04--01071--018 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 all other like empowered.

SIGNATURE:

Luther J. Richter **Luther J. Richter** **4/19/04** **850-668-0700**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #