

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002197

FILED  
Mar 25, 2011  
Secretary of State

**Entity Name:** PROVIDENT HOUSING RESOURCES INC.

**Current Principal Place of Business:**

5565 BANKERS AVENUE  
BATON ROUGE, LA 70808

**New Principal Place of Business:**

**Current Mailing Address:**

5565 BANKERS AVENUE  
BATON ROUGE, LA 70808

**New Mailing Address:**

**FEI Number:** 31-1707833

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HICKS, STEVE E  
Address: 5565 BANKERS AVENUE  
City-St-Zip: BATON ROUGE, LA 70808

Title: D  
Name: MONSOUR, WALTER A  
Address: 7022 RICHARDS DRIVE  
City-St-Zip: BATON ROUGE, LA 70809

Title: S  
Name: HICKS, DONOVAN O  
Address: 5565 BANKERS AVENUE  
City-St-Zip: BATON ROUGE, LA 70808

Title: CFO  
Name: LOCKWOOD, DEBRA W  
Address: 5565 BANKERS AVENUE  
City-St-Zip: BATON ROUGE, LA 70808

Title: VP  
Name: LOCKWOOD, DEBRA W  
Address: 5565 BANKERS AVENUE  
City-St-Zip: BATON ROUGE, LA 70808

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: DONOVAN O. HICKS

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03/25/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date