


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2008 8:00 am
Secretary of State

05-06-2008 90031 008 ***150.00

DOCUMENT # J37101	
1. Entity Name PROVIDENT ADVERTISING & MARKETING, INC.	

Principal Place of Business 107 HAMPTON ROA, SUITE 120 CLEARWATER, FL 33759 US	Mailing Address 107 HAMPTON ROA, SUITE 120 STE 120 CLEARWATER, FL 33759 US
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DO NOT WRITE IN THIS SPACE

40098000



01252008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2767051	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DROSTE, EDWARD C
107 HAMPTON ROA, SUITE 120
CLEARWATER, FL 33759**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE P	CEO
NAME DROSTE, EDWARD C.	
STREET ADDRESS 107 HAMPTON ROAD SUITE 120	
CITY-ST-ZIP CLEARWATER, FL 33759	
TITLE D	
NAME BAILEY, ELLEN	
STREET ADDRESS 107 HAMPTON ROA, SUITE 120	
CITY-ST-ZIP CLEARWATER, FL 33759	
TITLE D	
NAME HOWIE, BRENTON	
STREET ADDRESS 107 HAMPTON ROA, SUITE 120	
CITY-ST-ZIP CLEARWATER, FL 33759	
TITLE EVP	
NAME PASSWATERS, ROBERT	
STREET ADDRESS 107 HAMPTON ROA, SUITE 120	
CITY-ST-ZIP CLEARWATER, FL 33759	
TITLE VPT	
NAME WILLIAMS, WILSON F	
STREET ADDRESS 107 HAMPTON ROA, SUITE 120	
CITY-ST-ZIP CLEARWATER, FL 33759	
TITLE VP	PRESIDENT
NAME WILLIAMS, DENISE	
STREET ADDRESS 107 HAMPTON ROAD SUITE 120	
CITY-ST-ZIP CLEARWATER, FL 33759	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Wilson F. Williams **WILSON F. WILLIAMS** 4/18/07 727-726-5677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #