2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040604

Address:

City-St-Zip:

PO BOX 501170

MALABAR, FL 329501170

Entity Name: PROVIDER RESOURCES LLC

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3695 LAURENS AVE. VALKARIA, FL 32950 **Current Mailing Address: New Mailing Address:** PO BOX 501170 MALABAR, FL 329501170 FEI Number: 14-1909961 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENNETT, SANDRA D 3695 LAURENS AVE. VALKARIA, FL 32950 US 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition BENNETT, JERRY L Name: Name: Address: PO BOX 501170 Address: City-St-Zip: MALABAR, FL 329501170 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BENNETT, SANDRA D Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SANDRA D. BENNETT MGRM 04/18/2006