2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008
Secretary of State

DOCUMENT# L07418

Entity Name: PROVIDER FINANCIAL SERVICES, INC.

Current Principal Place of Business:

2499 GLADES ROAD
101
BOCA RATON, FL 33433 US

New Principal Place of Business:

2499 GLADES ROAD
101
BOCA RATON, FL 33431 US

Current Mailing Address:

2499 GLADES ROAD
101
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 65-0144142 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, HARLAN I.
2499 GLADES ROAD
101
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: P ( ) Delete
Name: COHEN, HARLAN I.,
Address: 2499 GLADES RD., STE. 101
City-St-Zip: BOCA RATON, FL 33431

Title: VP ( ) Delete
Name: COHEN, KATTY W.
Address: 2499 GLADES RD., STE. 101
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COHEN, HARLAN I.,
Address: 2499 GLADES RD., STE. 101
City-St-Zip: BOCA RATON, FL 33431

Title: VP (X) Change ( ) Addition
Name: COHEN, KATTY W.
Address: 2499 GLADES RD., STE. 101
City-St-Zip: BOCA RATON, FL 33431

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: HARLAN I COHEN PRES 04/15/2008

Electronic Signature of Signing Officer or Director Date