

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082110

Entity Name: CNP PROVIDERS, INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

257 NW 107 AVENUE
PEMBROKE PINES, FL 33026

New Principal Place of Business:

6211 SW 35 STREET
MIRAMAR, FL 33023 50

Current Mailing Address:

257 NW 107 AVENUE
PEMBROKE PINES, FL 33026

New Mailing Address:

6211SW 35 STREET
MIRAMAR, FL 33023 50

FEI Number: 20-0124465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDING, NADEEN S
4220 HAYES STREET
HOLLYWOOD, FL 33021 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: FFRENCH-HARDING, CONSTANCE B
Address: 257 NW 107 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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 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 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: CONSTANCE B. FFRENCH-HARDING

P

01/10/2005

Electronic Signature of Signing Officer or Director

Date