

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000094138

FILED  
Apr 01, 2008  
Secretary of State

Entity Name: THE PROVIDER CONNECTION, INC.

## Current Principal Place of Business:

1225 S. TAMIAMI TRAIL  
SARASOTA, FL 34239

## New Principal Place of Business:

## Current Mailing Address:

1225 S. TAMIAMI TRAIL  
SARASOTA, FL 34239

## New Mailing Address:

FEI Number: 20-3093118

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIEDI, ERIC  
7727 CLUB LANE  
SARASOTA, FL 34238 US

## Name and Address of New Registered Agent:

RIEDI, ERIC  
5384 ANTHONY LANE  
SARASOTA, FL 34233 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:

04/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RIEDI, ERIC  
Address: 7727 CLUB LANE  
City-St-Zip: SARASOTA, FL 34238

Title: V ( ) Delete  
Name: SRIVASTVA, ALKA  
Address: 7727 CLUB LANE  
City-St-Zip: SARASOTA, FL 34238

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RIEDI, ERIC  
Address: 5384 ANTHONY LANE  
City-St-Zip: SARASOTA, FL 34233

Title: V (X) Change ( ) Addition  
Name: SRIVASTVA, ALKA  
Address: 5384 ANTHONY LANE  
City-St-Zip: SARASOTA, FL 34233

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: ALKA SRIVASTVA

V

04/01/2008

Electronic Signature of Signing Officer or Director

Date