

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139951

FILED
May 22, 2007
Secretary of State

Entity Name: PROVIDENTIAL INVESTMENT GROUP, INC

Current Principal Place of Business:

5891 SAMOA DRIVE
BOKEELIA, FL 33922

New Principal Place of Business:

Current Mailing Address:

5891 SAMOA DRIVE
BOKEELIA, FL 33922

New Mailing Address:

PO BOX 474
ALEXANDER CITY, AL 35011

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWAN, LAWRENCE
1749 NE 10TH TERRACE
UNIT 4
CAPE CORAL, FL 33909 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARDY, GARY
Address: 5891 SAMOA DRIVE
City-St-Zip: BOKEELIA, FL 33922

Title: VD () Delete
Name: SIMMONS, AMANDA
Address: 438 TOMPSON RIDGE ROAD
City-St-Zip: ALEXANDER CITY, AL 35010

Title: VD () Delete
Name: GRIGGS, GARY
Address: 855 MARKET PLACE
City-St-Zip: ALEXANDER CITY, AL 35010

Title: SD (X) Delete
Name: GRIGGS, JOEY
Address: 855 MARKET PLACE
City-St-Zip: ALEXANDER, AL 35010

Title: TD (X) Delete
Name: GRIGGS, STEVEN
Address: 855 MARKET PLACE
City-St-Zip: ALEXANDER CITY, AL 35010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: HARDY, AMANDA
Address: PO BOX 474
City-St-Zip: ALEXANDER CITY, AL 35011

Title: VD (X) Change () Addition
Name: HARDY, DAVID
Address: 4317 SW 1ST PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY HARDY

VD

05/22/2007

Electronic Signature of Signing Officer or Director

Date