

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139951

FILED
May 16, 2008
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:

4317 SW 1ST PLACE
CAPE CORAL, FL 33914

Current Mailing Address:

PO BOX 474
ALEXANDER CITY, AL 35011

New Mailing Address:

4317 SW 1ST PLACE
CAPE CORAL, FL 33914

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

SWAN, LAWRENCE
709 CAPE CORAL PARKWAY W
CAPE CORAL, FL 33914 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:

05/16/2008

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: HARDY, AMANDA
Address: PO BOX 474
City-St-Zip: ALEXANDER CITY, AL 35011

Title: VD () Delete
Name: HARDY, DAVID
Address: 5891 SAMOA DR
City-St-Zip: BOKEELIA, FL 33922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: HARDY, DAVID
Address: 4317 SW 1ST PLACE
City-St-Zip: CAPE CORAL, FL 33194

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: AMANDA HARDY

VP

05/16/2008

Electronic Signature of Signing Officer or Director

Date