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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P27970
 1. Corporation Name
PROVIDENT SECURITIES & INVESTMENT COMPANY

Principal Place of Business: ONE EAST FOURTH ST. CINCINNATI OH 45202
 Mailing Address: ONE EAST FOURTH ST. CINCINNATI OH 45202



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/29/1990

4. FEI Number: 31-1078499 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 - May Be Added to Fees

Trust Fund Contribution:

8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business (21-23) and 2a. Mailing Address (26-28) fields.

9. Name and Address of Current Registered Agent: CT CORPORATION SYSTEM, 1200 S. PINE ISLAND ROAD, PLANTATION FL 33324

10. Name and Address of New Registered Agent (81-85) fields.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: VT	MURPHY, JAMES, E 1 EAST FOURTH ST. CINCINNATI OH	1.1 TITLE: President/Managing Director/Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: CO	LUEBBE, GREGORY M 1 EAST FOURTH ST CINCINNATI OH 45202	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP	BARRETT, JAMES J. 1 EAST 4TH ST. CINCINNATI OH	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:		4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James E. Murphy 2/9/99 513/579-2077
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/98)