

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P27970

1. Entity Name

## PROVIDENT SECURITIES & INVESTMENT COMPANY

Principal Place of Business

Mailing Address

ONE EAST FOURTH STREET  
MAIL STOP 852D  
CINCINNATI, OHIO 45202

ONE EAST FOURTH STREET  
MAIL STOP 852D  
CINCINNATI, OHIO 45202

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

31-1078499

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FLORIDA 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

PMDT  
MURPHY, JAMES, E  
1 EAST FOURTH ST.  
CINCINNATI, OH 45202

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

CO  
LOASBY, DAVID  
1 EAST FOURTH ST.  
CINCINNATI, OH 45202

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

CO  
LUEBBE, GREGORY M  
1 EAST FOURTH ST.  
CINCINNATI, OH 45202

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

ASSISTANT VICE PRESIDENT  
MICHAEL K. GIBSON  
1 EAST FOURTH STREET  
CINCINNATI, OH 45202

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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☒ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mike Gibson*

MIKE GIBSON

9-22-00 513-5792767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APPROVED  
AND  
FILED

00 SEP 27 PM 1:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/29/00 90188 025  
DO NOT WRITE IN THIS SPACE