

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000060662

FILED
Dec 13, 2006
Secretary of State**Entity Name:** THE PROVIDER MANAGEMENT GROUP, INC.**Current Principal Place of Business:**9825 HARRELL AVENUE
503
TREASURE ISLAND, FL 33706 US**Current Mailing Address:**P.O. BOX 41743
ST PETERSBURG, FL 33743 US**New Principal Place of Business:**111 N ORANGE AVENUE
2000
ORLANDO, FL 32801 US**New Mailing Address:**111 N ORANGE AVENUE
2000
ORLANDO, FL 32801 US**FEI Number:** 59-3258022**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOWDER, ROBERT
9825 HARRELL AVENUE
503
TREASURE ISLAND, FL FL US**Name and Address of New Registered Agent:**BERMAN, RICHARD ESQ.
2101 W COMMERCIAL BLVD
2800
FT. LAUDERDALE, FL 33309 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: RICHARD BERMAN

12/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOWDER, CHARLOTTE
Address: 9825 HARRELL AVENUE #503
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: STD () Delete
Name: LOWDER, ROBERT
Address: 9825 HARRELL AVENUE #503
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOWDER, CHARLOTTE
Address: 111 N ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801 US

Title: STD (X) Change () Addition
Name: LOWDER, ROBERT
Address: 111 N ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801 US

Title: S () Change (X) Addition
Name: WALTERS, CHAD A
Address: 111 N ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: T () Change (X) Addition
Name: MUNROE, KEVIN
Address: 111 N ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: D () Change (X) Addition
Name: ARMITAGE, DEAN
Address: 111 N ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: D () Change (X) Addition
Name: FISHER, BRIAN
Address: 111 N ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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: CHAD WALTERS

S

12/13/2006

Electronic Signature of Signing Officer or Director

Date