

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000034057

FILED
Apr 30, 2005
Secretary of State

Entity Name: PROVIDER MARKETING GROUP, INC.

Current Principal Place of Business:

1616 GATSBY COURT
CASSELBERRY, FL 32707

New Principal Place of Business:

424 E. CENTRAL BLVD.
131
ORLANDO, FL 32801

Current Mailing Address:

P.O. BOX 182025
CASSELBERRY, FL 32718 US

New Mailing Address:

424 E. CENTRAL BLVD.
131
ORLANDO, FL 32801 US

FEI Number: 59-3312891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIDT, ROBERT N JR
1616 GATSBY COURT
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

SCHMIDT, ROBERT N JR
424 E. CENTRAL BLVD.
131
ORLANDO, FL 32801 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:

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHMIDT, ROBERT N JR
Address: 1616 GATSBY COURT
City-St-Zip: CASSELBERRY, FL 32707

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHMIDT, ROBERT N JR
Address: 424 E. CENTRAL BLVD. #131
City-St-Zip: ORLANDO, FL 32801

Title: P () Change (X) Addition
Name: ROBERT, SCHMIDT N JR
Address: 424 E. CENTRAL BLVD. #131
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 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 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: ROBERT N. SCHMIDT, JR.

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date