

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000016382

FILED
Apr 01, 2004
Secretary of State

Entity Name: PROVIDENCE FINANCIAL, INC.

Current Principal Place of Business:

3817 WEST HUMPHREY STREET
SUITE 204
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

P O BOX 340245
TAMPA, FL 33694

New Mailing Address:

FEI Number: 59-3560035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRIGAN, THOMAS J
11282 W HILLSBOROUGH AVE
TAMPA, FL 33635 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: IURATO, JOY R
Address: 3817 WEST HUMPHREY STREET
City-St-Zip: TAMPA, FL 33614

Title: VD (X) Delete
Name: IURATO, THOMAS
Address: 3817 WEST HUMPHREY STREET
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: IURATO, THOMAS
Address: 3817 WEST HUMPHREY STREET
City-St-Zip: TAMPA, FL 33614

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS IURATO

PSTD

04/01/2004

Electronic Signature of Signing Officer or Director

Date