2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2013
Secretary of State
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Entity Name: PROVIDENT GROUP - CITRUS HEALTH & REHABILITATION CENTER LLC

Current Principal Place of Business:

5565 BANKERS AVENUE
BATON ROUGE, LA 70808

Current Mailing Address:

5565 BANKERS AVENUE
BATON ROUGE, LA 70808

FEI Number: 75-3006601

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM
Name	PROVIDENT RESOURCES GROUP INC.
Address	5565 BANKERS AVENUE
City-State-Zip:	BATON ROUGE LA 70808

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONOVAN O. HICKS SECRETARY 04/22/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date