

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709767

FILED
Feb 02, 2004
Secretary of State**Entity Name:** FLORIDA CABLE TELECOMMUNICATIONS ASSOCIATION, INC.**Current Principal Place of Business:**246 E. 6TH AVE.
SUITE 100
TALLAHASSEE, FL 32303 US**New Principal Place of Business:****Current Mailing Address:**246 E. 6TH AVE.
SUITE 100
TALLAHASSEE, FL 32303 US**New Mailing Address:****FEI Number:** 23-7375258 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILKERSON, STEVEN E
246 E. 6TH AVE.
SUITE 100
TALLAHASSEE, FL 32303 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

OFFICERS AND DIRECTORS:**Title:** DC () Delete
Name: MCQUINN, JEFF
Address: 2600 MCCORMICK DR STE 255
City-St-Zip: CLEARWATER, FL 34619**Title:** CD () Delete
Name: BELLO, TONY
Address: 1681 79TH ST CAUSEWAY
City-St-Zip: NORTH BAY VILLAGE, FL 33141**Title:** PD () Delete
Name: WILKERSON, STEVEN E
Address: 246 E. 6TH AVE., STE. 100
City-St-Zip: TALLAHASSEE, FL 32303**Title:** SD () Delete
Name: CASSARD, GARY
Address: 6020 NW 43RD ST.
City-St-Zip: GAINESVILLE, FL 32653**Title:** VD () Delete
Name: O'NEILL, MAUREEN
Address: 600 N PINE ISLAND RD STE 100
City-St-Zip: PLANTATION, FL 33324**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VD (X) Change () Addition
Name: DAN, HEBERT
Address: 1100 NORTHPOINT PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33407**Title:** CD (X) Change () Addition
Name: DVOSKIN, STEVE
Address: 5205 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34232**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SD (X) Change () Addition
Name: GREGORY, KEITH
Address: 2205 LA VISTA AVENUE
City-St-Zip: PENSACOLA, FL 32504**Title:** TD (X) Change () Addition
Name: CULPEPPER, DIANE
Address: 2251 LUCIEN WAY, SUITE 320
City-St-Zip: MAITLAND, FL 32751

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN E. WILKERSON

PD

02/02/2004

Electronic Signature of Signing Officer or Director

Date