2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State

02-11-2008 90063 050 ****61.25

DOCUMENT:	[‡] 717001	

1. Entity Name COMMUNITY TELEVISION FOUNDATION OF SOUTH FLORIDA, INC.



FLORIDA, INC. Principal Place of Business Mailing Address 14901 N.E. 20 AVE. 14901 N.E. 20 AVE. N. MIAMI, FL 33181-1121 N. MIAMI, FL 33181-1121 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01312008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-0737868 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCHNEIDER; RICHARD W Street Address (P.O. Box Number is Not Acceptable) 14901 N.E. 20TH AVENUE MIAMI, FL 33181 City Zip Code 8. 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State , OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete Change ☐ Addition TITLE TITLE NAME JORDAŇ, ROBERT K NAME JORDAN, ROBERT K STREET ADDRESS 10480 SW 122ND STREET STREET ADDRESS 10480 SW 122ND STREET MIAMI, FL 33176 CITY-ST-7(P CITY-ST-ZIP MIAMI. FL 33176 TITLE Delete TITLE ☐ Change ☐ Addition SCHNEIDER, RICHARD W NAME NAME STREET ADDRESS 14901 NE 20TH AVENUE STREET ADDRESS MIAMI, FL 33181 CITY-ST-ZIP CITY-ST-ZIP D TITLE ☐ Delete TITLE □ Change ☐ Addition YARDLEY, HERBERT NAME NAME STREET ADDRESS 777 N SR 7 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33317 CITY+ST-ZIP TITLE ☐ Defete ☐ Change ☐ Addition CARROLL, SHIRLEY C NAME NAME STREET ADDRESS 14901 NE 20TH AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP TITLE □ Delete TITLE □ Change ■ Addition SOCIAS, PEGGY NAME NAME STREET ADDRESS 14901 NE 20TH AVE. STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-7IP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 empoyered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact/ment with figure 12 and 12 and 13 and 14 are 11 and 14 are 12 and 14 are 12 and 14 are 12 and 14 are 13 and 14 are 14 are 14 are 14 are 15 are 14 are 15 are 14 are 15 are 15

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE:

D

MENDOZA, CRISTINA L

MIAMI, FL 33199

11200 SW 8TH STREET, PC 511

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

2/6/08

MENDOZA, CRISTINA L

MIAMI, FL 33199

11200 SW 8TH STREET, PC 511

305-944-834

Daytime Phone #

XX Change

☐ Addition