


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 08, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P99000052185  
 1. Entity Name  
 SPACECOAST CABLE & HARNESS, INC.



Principal Place of Business      Mailing Address  
 2189 NORTH US 1                      2189 NORTH US 1  
 TITUSVILLE, FL 32796              TITUSVILLE, FL 32796



04022004      No Chg-P      CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 59-3581157                      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

MILLER, PERRY W  
 2189 NORTH US 1  
 TITUSVILLE, FL 32796

**DO NOT WRITE IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00**      9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	MILLER, PERRY W
STREET ADDRESS	2189 NORTH US 1
CITY - ST - ZIP	TITUSVILLE, FL 32796
TITLE	D
NAME	EDENS, J W
STREET ADDRESS	3535 PALMER DR.
CITY - ST - ZIP	TITUSVILLE, FL 32780
TITLE	D
NAME	HULSBERG, BRIAN D
STREET ADDRESS	1974 DIPOL COURTEWAY
CITY - ST - ZIP	TITUSVILLE, FL 32780
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000106984  
 04/08/04-80039-001 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 907, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  U.P. J. WAYNE EDENS 4/06/04 321-388-915