2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 373407

FILED Jan 13, 2009 Secretary of State

Entity Name: CORPORATE PROGRAMMING OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 1489 W PALMETTO PARK ROAD #445 1489 W PALMETTO PARK ROAD #445 BOCA RATON, FL 33486 BOCA RATON, FL 33498-491 **Current Mailing Address: New Mailing Address:** 18704 OCEAN MIST DRIVE BOCA RATON, FL 33498 FEI Number: 59-1308170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARKS, RICHARD L MARKS, RICHARD L 18704 OCEAN MIST DR 18704 OCEAN MIST DRIVE BOCA RATON, FL 33498 US BOCA RATON, FL 33498-491 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: RICHARD L. MARKS 01/13/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MARKS, RICHARD L Name: Name: 18704 OCEAN MIST DRIVE Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: PD Title: Title: () Delete () Change () Addition Name: MARKS, RENEE T Name: 18704 OCEAN MIST DRIVE Address: Address: BOCA RATON, FL 33498 City-St-Zip: City-St-Zip: Title: Title: SD () Delete () Change () Addition MARKS, LANNY K Name: Name: 6511 TIMBER LANE Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: Title: VPD () Delete Title: () Change () Addition MASON, NICOLE Name: Name: Address: 9857 PALMA VISTA WAY Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33428 Title: TD () Delete Title: () Change () Addition MARKS, DAVID S Name: Name: 20925 NE 31 PLACE Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RICHARD L. MARKS VPD 01/13/2009