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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 376344 (8)

1. Corporation Name
HOLLAND'S TELEVISION, INC.

Principal Place of Business
6511 FOREST CITY ROAD
ORLANDO FL 32810

Mailing Address
6511 FOREST CITY ROAD
ORLANDO FL 32810-4323



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/15/1971		3a. Date of Last Report 01/30/1996	
21	State, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1320816		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
25		30		USA			

9. Name and Address of Current Registered Agent HARMENING, WILLIAM A 430 CROWNE OAK CENTRE DR LONGWOOD FL 32750				10. Name and Address of New Registered Agent			
				81 Name Orlando Lee Holland			
				82 Street Address (P.O. Box Number is Not Acceptable) 2405 Helen Avenue			
				83			
				84 City Orlando, FL FL 85 Zip Code 32804			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Orlando L. Holland *Orlando L. Holland* 4/24/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PTD	Orlando L. Holland	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOLLAND, BOBBY B		1.2 NAME		2405 Helen Avenue		
STREET ADDRESS	6511 FOREST CITY ROAD		1.3 STREET ADDRESS		Orlando, FL 32804		
CITY- ST- ZIP	ORLANDO FL		1.4 CITY- ST- ZIP				
TITLE	VT	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	SD	Sheryl P. Holland	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOLLAND, VIRGINIA P.		2.2 NAME		2405 Helen Avenue		
STREET ADDRESS	6511 FOREST CITY ROAD		2.3 STREET ADDRESS		Orlando, FL 32804		
CITY- ST- ZIP	ORLANDO FL		2.4 CITY- ST- ZIP				
TITLE	SD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	D	Chester A. Wingate, Sr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARMENING, WILLIAM A.		3.2 NAME		1226 Wendy Road		
STREET ADDRESS	430 CROWNE OAK CENTRE DR		3.3 STREET ADDRESS		Rock Hill, SC 29732		
CITY- ST- ZIP	LONGWOOD FL		3.4 CITY- ST- ZIP				
TITLE	D	<input checked="" type="checkbox"/> DELETE	4.1 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOLLAND, VIRGINIA		4.2 NAME				
STREET ADDRESS	6511 FOREST CITY ROAD		4.3 STREET ADDRESS				
CITY- ST- ZIP	ORLANDO FL		4.4 CITY- ST- ZIP				
TITLE	D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GEIST, SIDNEY		5.2 NAME				
STREET ADDRESS	3113 LAWTON ROAD		5.3 STREET ADDRESS				
CITY- ST- ZIP	ORLANDO FL		5.4 CITY- ST- ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY- ST- ZIP			6.4 CITY- ST- ZIP				

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Orlando L. Holland* ORLANDO L. HOLLAND 4/24/97 407-293-5577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)