

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90200 032 ***150.00



DOCUMENT # 378179
 1. Entity Name
COMCAST OF SOUTH FLORIDA I, INC.

Principal Place of Business
**1500 MARKET ST
 PHILADELPHIA, PA 19102-2148 US**

Mailing Address
**1500 MARKET ST
 PHILADELPHIA, PA 19102-2148 US**



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04212004 Chg-P CR2E034 (10/03)

City & State

4. FEI Number
05-0346725

Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

**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 NAME	P BURKE, STEPHEN B	<input type="checkbox"/> Delete
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA, PA 191022148	
TITLE NAME	V BACKSTROM, STEPHEN C	<input type="checkbox"/> Delete
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA, PA 191022148	
TITLE NAME	T ALCHIN, JOHN R	<input type="checkbox"/> Delete
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA, PA 191022148	
TITLE NAME	S BLOCK, ARTHUR R	<input type="checkbox"/> Delete
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA, PA 191022148	
TITLE NAME	D BLOCK, ARTHUR R	<input type="checkbox"/> Delete
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA, PA 191022148	
TITLE NAME	D SMITH, LAWRENCE S	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA, PA 191022148	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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 607, 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: C.S. Backstrom **C.STEPHEN BACKSTROM** 4/27/04 **215-981-7557**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #