2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008
Secretary of State

DOCUMENT# 562703

Entity Name: CALOOSA TELEVISION CORPORATION

Current Principal Place of Business:

222 COMMERCE ST
KINGSPORT, TN 37662 US

New Principal Place of Business:

Current Mailing Address:

222 COMMERCE ST
KINGSPORT, TN 37662 US

New Mailing Address:

FEI Number: 22-2194899 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOROWITZ, WILLIAM N.
1715 MONROE ST
FORT MYERS, FL 339020280 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	FONTANA, JOSEPH D.,	
Address:	2 VAN ETTA ROAD	
City-St-Zip:	WHITEHOUSE STATION, NJ	
Title:	CD	( ) Delete
Name:	BOYD, WILLIAM M.,	
Address:	2325 AVENIDA DE LA PLAYA	
City-St-Zip:	LA JOLLA, CA 92037	
Title:	DP	( ) Delete
Name:	DEVAULT, GEORGE E JR	
Address:	2153 HEATHERLY ROAD	
City-St-Zip:	KINGSPORT, TN 37660	
Title:	D	( ) Delete
Name:	CARR, JERRY	
Address:	6965 PALMAR CRT	
City-St-Zip:	BOCA RATON, FL 33433	
Title:	T	( ) Delete
Name:	LAWSON, BETTE	
Address:	RT 1 BOX 219	
City-St-Zip:	SURGOINVILLE, TN 37873	
Title:	S	( ) Delete
Name:	BRAGG, JANET L	
Address:	1816 MAYWOOD DR	
City-St-Zip:	KINGSPORT, TN 37660	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: BETTE LAWSON T 07/10/2008

Electronic Signature of Signing Officer or Director Date