2000 UNIFORM BUSINESS REPORT (UBR)

Apr 12, 2000 8:00 am Secretary of State DOCUMENT # 669814 1. Entity Name ASSOCIATED COMMUNICATIONS CABLE, INC. 04-12-2000 90017 010 ***150.00 Mailing Address Principal Place of Business C O CHRISTIANSEN & DEWNER PA 715 6TH ST W 63 SARASOTA CENTER BLVD STE 107 BRADENTON FL 34205 SARASOTA FL 34240-9385 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2024508 Not Applicable _ Zip _ Country . -Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Christiansen, scott R. Street Address (P.O. Box Number is Not Acceptable) 63 SARASOTA CENTER BLVD STE 107 SARASOTA FL 34240 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD □ Delete TITLE Change ☐ Addition TITLE RESHKE, ROBERT A. NAME NAME STREET ADDRESS 8616 21ST AVE. N.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** Delete ☐ Change ☐ Addition TITLE PIERGROSSI, ROCCO T. NAME STREET ADDRESS 310 136 CT E STREET ADDRESS CITY-ST-ZIP BRADEN ON FL 34202 CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE Pièrgrossi, Kathleen G. NAME NAME 310 136 CT E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34202 Change Addition ☐ Delete TITLE TITLE TOYCE A. REGHKE RESHKE, JOYCE A. NAME NAME 8616 21ST AVE N.W. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BRADENTON FL** Addition ☐ Change ☐ Delete TITLE SILVA RENEE SILVA RENEE NAME NAME 909 - 137 St.E. 909 - 137 St. E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP BRADENTON FL BRADENTON, FL Addition ☐ Delete Change TITLE TITLE TAMES SILVA NAME NAME 909 - 137 St. E. STREET ADDRESS 909 - 137 5th E. STREET ADDRESS CITY-ST-ZIP

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

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BRADENTON.

Toyce A. RESHKE 4/6/2000 941-74

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