

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 669814

1. Entity Name
ASSOCIATED COMMUNICATIONS CABLE, INC.

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90466 014 ***150.00

Principal Place of Business

715 6TH ST W
BRADENTON FL 34205
US

Mailing Address

C O CHRISTIANSEN & DEWNER PA
63 SARASOTA CENTER BLVD STE 107
SARASOTA FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 59-2024508

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHRISTIANSEN, SCOTT R.
63 SARASOTA CENTER BLVD STE 107
SARASOTA FL 34240

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME RESHKE, ROBERT A.
STREET ADDRESS 8616 21ST AVE. N.W.
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME RESHKE, JOTCE A
STREET ADDRESS 8616 21ST AVE N.W.
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME RESHKE, JOTCE A
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME SILVA, RENEE
STREET ADDRESS 909 137 ST E
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME SILVA, JAMES
STREET ADDRESS 909 137 ST E
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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.

SIGNATURE: Joyce A. Reshke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/01 941-748-4959
Date Daytime Phone #

CR2E034 (10/00)