2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 669814

FILED Mar 19, 2009 Secretary of State

Entity Name: ASSOCIATED COMMUNICATIONS CABLE, INC.

urrent P	Principal Place o	of Business:	New Principal Place	of Business:
	•		pai i iavo	
15 6TH S RADENT	FON, FL 34205	US		
urrent N	lailing Address	:	New Mailing Addres	ss:
15 6TH S RADENT	ST W FON, FL 34205	US		
El Number	: 59-2024508	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of Cເ	ırrent Registered Agent:	Name and Address of	of New Registered Agent:
SILVA, RE 15 6 STR BRADENT		US		
	e named entity su e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	ubmits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
the State	e of Florida. RE:	ubmits this statement for the		ed office or registered agent, or both, Date
the State	e of Florida. RE:Electronic			
the State	e of Florida. RE:Electronic	c Signature of Registered Ag	ent	
the State	e of Florida. RE: Electronic mpaign Financing S AND DIRECT	© Signature of Registered Ag Trust Fund Contribution (). ORS: Delete E A N.W.	ent	Date
n the State IGNATUI Iection Car DFFICER: itle: ame: ddress:	e of Florida. RE: Electronic mpaign Financing S AND DIRECT TD () E RESHKE, JOYCE 8616 21ST AVE I BRADENTON, FL	C Signature of Registered Ag Trust Fund Contribution (). ORS: Delete E A N.W. 0. 34209 US Delete	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: RENEE M SILVA PRES 03/19/2009