2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# F03000005425

Entity Name: SOUTHERN MARYLAND CABLE, INC.

Current Principal Place of Business:

P.O. BOX 30
TRACY'S LANDING, MD 20779

New Principal Place of Business:

5932 SOLOMONS ISLAND ROAD
TRACY'S LANDING, MD 20779

Current Mailing Address:

P.O. BOX 30
TRACY'S LANDING, MD 20779

New Mailing Address:

FEI Number: 20-0086897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DT ( ) Delete
Name: TRUDEL, ARTHUR
Address: 5932 SOLOMONS ISLAND RD.
City-St-Zip: TRACY'S LANDING, MD 20779

Title: V ( ) Delete
Name: TOEWS, JOY P
Address: 5932 SOLOMONS ISL. RD.
City-St-Zip: TRACY"S LANDING, MD 20779

Title: P ( ) Delete
Name: GILES, STEVE
Address: 5432 SOLOMONS ISLAND ROAD
City-St-Zip: TRACYS LANDING, MD 20779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: GILES, STEVE
Address: 5932 SOLOMONS ISLAND ROAD
City-St-Zip: TRACYS LANDING, MD 20779

I hereby certify that the information supplied with this filing does not qualify for the 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: JOY P. TOEWS VP 04/26/2007

Electronic Signature of Signing Officer or Director — Date