

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005049

Entity Name: PACIFIC COAST CABLING, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

9340 ETON AVENUE  
CHATSWORTH, CA 91311

## New Principal Place of Business:

## Current Mailing Address:

9340 ETON AVENUE  
CHATSWORTH, CA 91311

## New Mailing Address:

FEI Number: 95-4141989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YOUNG, WILLIAM RVP  
5406 REFLECTIONS BLVD  
LUTZ, FL 33558 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: CP ( ) Delete  
Name: BURR, DAVID  
Address: 2730 S. HARDYN DRIVE #1  
City-St-Zip: TEMPE, AZ 85282

Title: DS ( ) Delete  
Name: HARRIS, RICHARD  
Address: 9340 ETON AVENUE  
City-St-Zip: CHATSWORTH, CA 91311

Title: DT ( ) Delete  
Name: WILMINGTON, JAMES A  
Address: 9340 ETON AVENUE  
City-St-Zip: CHATSWORTH, CA 91311

## 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:

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: PAT ABRUZZESE

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date