


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90051 021 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F97000006742			
1. Corporation Name APEX DIGITAL TV, INC.			
Principal Place of Business 450 PRYOR BLVD P. O. BOX 10 STURGIS KY 42459 US		Mailing Address 450 PRYOR BLVD PO BOX 10 STURGIS KY 42459 US	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip Country		28 Zip Country	
24		29	
25		30	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			
10. Name and Address of New Registered Agent			
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City			
85 Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE			
(NOTE: Registered Agent signature required when reinstating)			
DATE			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1997

4. FEI Number

31-1558094

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FL

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD

Ervin, Gary

450 Pryor Blvd.

Sturgis, KY 42459

WD

Pledger, Thomas

4440 PGA Boulevard

Palm Beach Gardens, FL 33410

WD

Nielsen, Steven

4440 PGA Boulevard

Palm Beach Gardens, FL 33410

TD

Betlach, Douglas

4440 PGA Boulevard

Palm Beach Gardens, FL 33410

SD

Tiller, Marc

4440 PGA Boulevard

Palm Beach Gardens, FL 33410

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99

(502) 333-3360

Date

Daytime Phone #

CR2E034 (1/98)

1999 ANNUAL REPORT CONTINUED

554654-90051-21
F97000006742

CORPORATE ID: F133495-4

NO CHANGE <input type="checkbox"/> REMOVE ENTIRE NAME/ADDRESS <input checked="" type="checkbox"/>		MAKE ADDITIONS/CHANGES IN RIGHT COLUMN ONLY	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	
NAME: TIM ERVIN TITLE: VICE PRESIDENT ADDRESS: 450 PRYOR BLVD CITY/ST/ZIP: STURGIS, KY 42245-0009		NAME: Thomas Pledger TITLE: Vice President ADDRESS: 4440 PGA Boulevard CITY/ST/ZIP: Palm Beach Gardens, FL 33410	
NO CHANGE <input type="checkbox"/> REMOVE ENTIRE NAME/ADDRESS <input checked="" type="checkbox"/>		MAKE ADDITIONS/CHANGES IN RIGHT COLUMN ONLY	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	
NAME: CHARLES MC ELROY TITLE: SECRETARY ADDRESS: 450 PRYOR BLVD CITY/ST/ZIP: STURGIS, KY 42459		NAME: Steve Nielsen TITLE: Vice President ADDRESS: 4440 PGA Boulevard CITY/ST/ZIP: Palm Beach Gardens, FL 33410	
NO CHANGE <input type="checkbox"/> REMOVE ENTIRE NAME/ADDRESS <input checked="" type="checkbox"/>		MAKE ADDITIONS/CHANGES IN RIGHT COLUMN ONLY	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	
NAME: ROBERT ERVIN TITLE: TREASURER ADDRESS: 450 PRYOR BLVD CITY/ST/ZIP: STURGIS, KY 42459		NAME: Douglas Betlach TITLE: Treasurer ADDRESS: 4440 PGA Boulevard CITY/ST/ZIP: Palm Beach Gardens, FL 33410	
NO CHANGE <input type="checkbox"/> REMOVE ENTIRE NAME/ADDRESS <input type="checkbox"/>		MAKE ADDITIONS/CHANGES IN RIGHT COLUMN ONLY	
OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	
NAME: TITLE: ADDRESS: CITY/ST/ZIP:		NAME: Marc Tiller TITLE: Secretary ADDRESS: 4440 PGA Boulevard CITY/ST/ZIP: Palm Beach Gardens, FL 33410	