2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G47051

Entity Name: FLORIDA CABLE, INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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832 N THORNTON AVENUE PO BOX 536518

ORLANDO, FL 32803

PO BOX 536518

ORLANDO, FL 32803 US

New Mailing Address: Current Mailing Address:

PO BOX 536518

ORLANDO, FL 32853 US

FEI Number: 59-2323728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ENGLISH, DANA D ENGLISH, DANA D 832 N THÓRNTON AVE 23505 STATE ROAD 40 ORLANDO, FL 32803 ASTOR, FL 32102

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: DANA D. ENGLISH 04/29/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete TUCKER, WALTER, Name: 303 ENTERPRISE ST Address:

City-St-Zip: OCOEE, FL

Title: () Delete ENGLISH, GARY M Name: 832 N. THORNTON AVE. Address: ORLANDO, FL 32803 City-St-Zip:

Title: () Delete ENGLISH, LARRY Name: 23748 STATE ROAD 40 Address:

City-St-Zip: ASTOR, FL

Title: VT () Delete ENGLISH, DANA D Name:

Address: 832 N. THORNTON AVE City-St-Zip: ORLANDO, FL 32803

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: (X) Change () Addition

Name: ENGLISH, GARY M 23505 STATE ROAD 40 Address: ASTOR, FL 32102 City-St-Zip:

Title: (X) Change () Addition

ENGLISH, LARRY Name: 23505 STATE ROAD 40 Address: City-St-Zip: ASTOR, FL 32102

Title: (X) Change () Addition

ENGLISH, DANA D Name: Address: 23505 STATE ROAD 40 City-St-Zip: ASTOR, FL 32102

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY M. ENGLISH **PRES** 04/29/2003