

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G50066

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: SPECIALTY BROADCASTING CORPORATION

**Current Principal Place of Business:**

1060 MCKEAN CIRCLE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 418  
WINTER PARK, FL 32790

**New Mailing Address:**

FEI Number: 59-2977649

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NAMEY, CHARLES S  
1060 MCKEAN CIRCLE  
WINTER PARK, FL 32789 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: DPST ( ) Delete  
Name: NAMEY, CHARLES S  
Address: 1060 MCKEAN CIRCLE  
City-St-Zip: WINTER PARK, FL 32789

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TREA ( ) Change (X) Addition  
Name: ATKINS, JANET E TREASUR  
Address: 1060 MCKEAN CIRCLE  
City-St-Zip: WINTER PARK, FL 32789

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: JANET E. ATKINS

TREA

01/04/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date