


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # J61387	
1. Entity Name CENTRAL FLORIDA SATELLITE TV COMPANY	

Principal Place of Business 4500 HWY. 92 E. LAKELAND, FL 33801	Mailing Address 4500 HWY 92 E, #1026 LAKELAND, FL #1030 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent KNAPP, RANDALL L 4500 HWY 92E, #1030 LAKELAND, FL 33801	DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.	

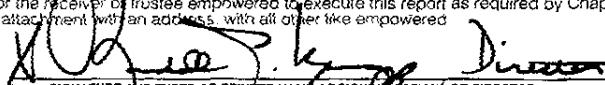
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small>		DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D KNAPP, MERLYN V 4500 92 E. SUITE 1030 LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D KNAPP, RANDALL L 4500 92 E. SUITE 1030 LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D KNAPP, DONALD O 4500 92 E. SUITE 1030 LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	

**DO NOT WRITE
IN THIS SPACE**

03/22/04-60024-001 150.00

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered	SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	3/11/04 <small>Date</small>	(863) 665-0185 <small>Daytime Phone #</small>
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