FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # K06780

(6)

TOTAL	CABLE COMMUNICATION	NS, INC.				
% PHIL L. BURGHARDT % PH 4421 12TH STREET COURT EAST 4421		Maling Address % Phil L. Burghari 4421 12TH STREET C BRADENTON FL 3420	OURT EAST			
				3. Date Incorporated or Qualified 12/14/1987	3a. Date of Last Report 03/01/1995	
Principal Pla	ce of Business	2a. Mailing Address 26		4. FEI Number 65-0018615	Applied For Not Applicable	
Suite, Apt. #, etc		Suite. Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	Ζ ₁ ρ	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s 199.032,	
	9. Name and Address of Curre	· · · · I — I — I — — — — — — — — — — —	130	10. Name and Address of New R		
• •			81 Name	10. Haine Bite Addition of Hew A	ogistered Agent	
BURGHA	ARDT, PHIL L.				· · · · · · · · · · · · · · · · · · ·	
4712 64 DR W			82 Street Addre	Address (P.O. Box Number is Not Acceptable)		
Braden	TON FL 34207		63			
			84 City		85 Zip Gode	
				ation submits this statement for the purp	FL	
GNATURE			ott: Registered Agent signature required	when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12	
L	SD	DELETE	1 1 TITLE		Change Addition	
MI.	BURGHARDT, PHIL L.		1.2 NAME			
RELLADORESS	4712 64 DR W		1.3 STREET ADDRESS			
Y - S1 - 210	BRADENTON FL TD	Fire	1.4 CITY+ST-ZIP			
LE	Burghardt, Brian D.	[] DELETE	2 1 TITLE		☐ Change ☐ Addition	
Me	4802 64 DRIVE W.		2.2 NAME			
REFLADORESS (BRADENTON FL		2 3 STREET ADDRESS			
Y - \$1 - ZIF JF	PD	DECETE	2 4 CITY-ST-7iP 3 1 TITLE		Change Addition	
Mt	COOK, THOMAS		3.2 NAME			
REFITALUFESS	RT. 5, BOX 94K3		33 STREET ADDRESS			
Y-51-20	PALMETTO FL		3.4 C(TY-\$T-Z)P			
ı.F		☐ DELETE	4. 1 TITLE		Change Addition	
ME			4 2 NAME			
REFLATORESS			4.3 STREET ADDRESS			
Y ST ZIF		FT DELETE	4 4 C/TY-ST-Z/P			
LF Max		☐ DELETE	5 1 TiTLE		Change Addition	
ME EFFEADURESS			5 2 NAME			
Y-S1 ZIF			5.3 STREET ADDRESS 5.4 City-St-Zip			
.f		DELETE	6 1 TiTLE	4	Change Addition	
.wi			6.2 NAME			
			63 STREET ADDRESS			
EFFT ADORESS			o a struct Auuntaa j			
TEFFT ASURESS HY-ST-ZIP			64 CITY-ST-ZIP			

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Phil Burghardt

01-18-96

941-756-1311

Daytime Prione II

(2E034 (12/95)