

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # K53915**

1. Corporation Name

**BROADBAND COMMUNICATIONS PRODUCTS, INC.**

Principal Place of Business

305 EAST DR #A  
MELBOURNE FL 32904  
US

Mailing Address

305 EAST DR #A  
MELBOURNE FL 32904  
US

**FILED**  
**Aug 02, 1999 8:00 am**  
**Secretary of State**

08-02-1999 90009 013 \*\*\*550.00

08-02-1999 90009 014 \*\*\*\*\*8.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**12/14/1988**

4. FEI Number

**59-2926871**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ Yes ☐ No

**\$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. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TOY, JAMES W.  
2811 S. CAMERON STREET (HOME)  
MELBOURNE FL 32901

10. Name and Address of New Registered Agent

81 Name

**Paul W. Casper**

82 Street Address (P.O. Box Number is Not Acceptable)

**8592 Sylvan Drive**

83

84 City

**Melbourne**

**FL**

85 Zip Code  
**32904**

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

*Paul W. Casper*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**27 July 99**  
DATE

12. OFFICERS AND DIRECTORS

TITLE **VP** ☒ DELETE  
NAME **ALFORD, DONALD R.**  
STREET ADDRESS **2608 S. FORREST DRIVE**  
CITY-ST-ZIP **MELBOURNE FL**

TITLE **VS** ☐ DELETE  
NAME **CASPER, PAUL W.**  
STREET ADDRESS **8592 SYLVAN DRIVE**  
CITY-ST-ZIP **MELBOURNE FL**

TITLE **V** ☒ DELETE  
NAME **BREITMEIER, JAMES W.**  
STREET ADDRESS **417 SUNSET BLVD.**  
CITY-ST-ZIP **MELBOURNE BEACH FL**

TITLE **TVP** ☒ DELETE  
NAME **TOY, JAMES W.**  
STREET ADDRESS **2811 S. CAMERON STREET**  
CITY-ST-ZIP **MELBOURNE FL**

TITLE **P** ☐ DELETE  
NAME **HENRY, DR ALLEN S**  
STREET ADDRESS **218 4TH AVE**  
CITY-ST-ZIP **MELBOURNE FL**

TITLE **VP** ☒ DELETE  
NAME **COTTEN WHITWORTH W**  
STREET ADDRESS **930 GREENTREE DR**  
CITY-ST-ZIP **WINTER PARK FL 32789**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS **3950 N. Riverside Drive**  
5.4 CITY-ST-ZIP **Indialantic, FL 32903**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**27 July 99** 407-984-3671  
Date Daytime Phone #

CR2E034 (5/99)