2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 29, 2005 08:00 AM Secretary of State

Sulta, Apt. 8, etc. City & State A. FEI Number 51-0456230 Strong-Applied 51-0456230 Strong-Applied For Plaguited	DOCUMENT # L02000034624 1. Entity Name BAY VILLAGE CABLE, L.L.C. Secretary 0						
Suite, Apt. 8, etc. City & State A FEI Number 51-0456230	2033 MAIN S	TREET, SUITE 600	2033 MAIN STREET, SUI	ITE 600			
City & State Ci	Principal Place of Business						
Top Country Zip Country 5: 0-0456230	Suite, Apt. #, etc.		Suite, Apt. #, etc.			01212005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent MYERS, TROY H JR ESQ 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237 City City FL Zip Code 8. The above named analy authorise this alterment for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, and the registered agent and the registered agent. SIGNATURE MARK DIGITAL COMMUNITY NETWORKS, INC. MOR DIGITAL COMMUNITY NETWORKS, INC. SIGNET ADDRESS OTHY-ST-2P TITLE MAKE MAKE MAKE SIGNAT ADDRESS OTHY-ST-2P MARAGING MEMBERS/MANAGERS 10. ADDITIONS/CH4VAGES TITLE MAKE SIGNAT ADDRESS OTH-ST-2P MARAGING MEMBERS/MANAGERS 10. ADDITIONS/CH4VAGES TITLE MAKE SIGNAT ADDRESS OTH-ST-2P TITLE MAKE MAKE SIGNAT ADDRESS OTH-ST-2P TITLE MAKE MAKE SIGNAT ADDRESS OTH-ST-2P TITLE MAKE SIGNAT ADDRESS OT	City & State		City & State				
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indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am a managing member or manager of limited liability company or the receiver or trustee employeed to execute this report as required by Chapter 608, Florida Statules. SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, WANAGER, OR AUTHORIZED REPRESENTATIVE Davis Daytime Phone #							