

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006377

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** HOME TOWN CABLE TV OF FT. PIERCE, LLC

**Current Principal Place of Business:**

10486 SW VILLAGE CENTER DRIVE  
PORT ST. LUCIE, FL 34987

**New Principal Place of Business:**

**Current Mailing Address:**

10486 SW VILLAGE CENTER DRIVE  
PORT ST. LUCIE, FL 34987

**New Mailing Address:**

**FEI Number:** 26-1378177

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RUBENSTEIN, MITCHELL  
10486 SW VILLAGE CENTER DRIVE  
PORT ST. LUCIE, FL 34987 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RUBENSTEIN, MITCHELL  
Address: 10486 SW VILLAGE CENTER DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 34987

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MITCHELL RUBENSTEIN

PRES

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date