

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 06, 2003 8:00 am**  
**Secretary of State**

01-06-2003 90070 003 \*\*\*\*70.00

**DOCUMENT # N00368**

1. Entity Name

**PALMETTO BROADCASTERS ASSOCIATED FOR COMMUNITIES, INC.**



Principal Place of Business

**5970 ABBOTTS RUN TRAIL  
DULUTH GA 30097**

Mailing Address

**1001 WALTER LANE  
VERO BEACH FL 32960**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2480491**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**RHEA, CAROLYN T  
1001 WALTER LANE  
VERO BEACH FL 32960**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **RHEA, CLAUDE H III**  
STREET ADDRESS **5970 ABBOTTS RUN TRAIL**  
CITY-ST-ZIP **DULUTH GA 30097**

TITLE **C** ☐ Delete  
NAME **RHEA, CLAUDE H. III**  
STREET ADDRESS **5970 ABBOTTS RUN TRAIL**  
CITY-ST-ZIP **DULUTH GA 30097**

TITLE **D** ☐ Delete  
NAME **MILLER, JAMES F**  
STREET ADDRESS **1711 WORTHINGTON RD, STE 202**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **TD** ☐ Delete  
NAME **BRIGHTLY, BRIAN**  
STREET ADDRESS **3901 NE 22ND AVE**  
CITY-ST-ZIP **LIGHTHOUSE PT FL 33064**

TITLE **D** ☐ Delete  
NAME **ESSEX, VIRGINIA**  
STREET ADDRESS **8139 LAKE POINTE COURT**  
CITY-ST-ZIP **PLANTATION FL 33322**

TITLE **SD** ☐ Delete  
NAME **FINLEY, ANITA**  
STREET ADDRESS **3 BEACHWAY N.**  
CITY-ST-ZIP **BOYNTON BEACH FL 33435**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 617, 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:

*Sig Claude H. Rhea III*

**1-3-03 770-410-6540**

CR2E037 (10/02)