

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007936

FILED
Aug 15, 2005
Secretary of State

Entity Name: PUBLIC ACCESS TELEVISION OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1716 SW WILLISTON RD
GAINESVILLE, FL 32608

New Principal Place of Business:

304 NE 6 ST.
APT A
GAINESVILLE, FL 32601

Current Mailing Address:

1716 SW WILLISTON RD
GAINESVILLE, FL 32608

New Mailing Address:

304 NE 6 ST.
APT A
GAINESVILLE, FL 32601

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLETT, CHARLES
1716 SW WILLISTON RD
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

GARCIA, RAQUEL
304 NE 6 ST
APT A
GAINESVILLE, FL 32601 US

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: RAQUEL GARCIA

08/15/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COPE, WAYNE
Address: P O BOX 309
City-St-Zip: MICANOPY, FL 326670309

Title: V () Delete
Name: GARCIA, RAQUEL
Address: 304 NE 6TH ST APT A
City-St-Zip: GAINESVILLE, FL 32601

Title: S () Delete
Name: MASTRODICASA, JEANNA
Address: 1406 NE 8TH ST
City-St-Zip: GAINESVILLE, FL 32601

Title: T (X) Delete
Name: WILLETT, CHARLES
Address: 1716 SW WILLISTON RD
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, COREY
Address: 6400 SW 20 AVE APT 121
City-St-Zip: GAINESVILLE, FL 32607

Title: V (X) Change () Addition
Name: HUNTLEY, ELLEN
Address: PO BOX 5211
City-St-Zip: GAINESVILLE, FL 32627

Title: T (X) Change () Addition
Name: GARCIA, RAQUEL
Address: 304 NE 6 ST. APT A
City-St-Zip: GAINESVILLE, FL 32601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAQUEL GARCIA

T

08/15/2005

Electronic Signature of Signing Officer or Director

Date