

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 04, 2004  
Secretary of State**

DOCUMENT# N96000004927

Entity Name: VISION BROADCASTING OF FLORIDA, INC.

**Current Principal Place of Business:**

2701 HODGES BLVD  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

2701 HODGES BLVD  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 59-3421884      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SMITH HULSEY & BUSEY  
225 WATER STREET  
SUITE 1800  
JACKSONVILLE, FL 32202 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

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: PAUL D ZINK,  
Address: 205 NORTH WIND CT  
City-St-Zip: PONTE VEDRA BCH, FL

Title: DVST ( ) Delete  
Name: JAMES C ZINK,  
Address: 1817 SPICEBERRY CIR EAST  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: JOHNS, JIMMY R  
Address: 2701 HODGES BLVD  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete  
Name: HART, JOHN B  
Address: 220 8TH AVE NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: JAMES C. ZINK

DVST

02/04/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date