


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 8:00 am
Secretary of State

03-10-2008 90055 047 ****61.25

DOCUMENT # N98000003395 1. Entity Name PINELLAS COMMUNITY TELEVISION, INC.					
Principal Place of Business 14125 YACHT CLUB BLVD SEMINOLE, FL 33776			Mailing Address PO BOX 661 LARGO, FL 33779-0661 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3523349	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOCHUM, JANICE 14125 YACHT CLUB BLVD SEMINOLE, FL 33776			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCE, KEVIN <input type="checkbox"/> Delete 14878-55TH WAY NORTH CLEARWATER, FL 33760		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Luce, Kevin 14878-55th Way N. Clearwater, FL 33760	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAVELO, RON <input type="checkbox"/> Delete 586 WALDEN CRT DUNEDIN, FL 34698		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Mangone, Vincent 7165-61st St. N. Pinellas Park, FL 33781	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIGGIN, JERRY <input checked="" type="checkbox"/> Delete 3339 BRIAR WOOD CIR SAFETY HARBOR, FL 34695		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kennedy, Terri 2963 Dartmouth Ave. N. St. Petersburg, FL 33713	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIGGIN, MARY F <input type="checkbox"/> Delete 3339 BRIARWOOD CIRCLE SAFETY HARBOR, FL 34695		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Riggins, Mary F. 3339 Briarwood Circle Safety Harbor, FL 34695	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PORT, DENNIS <input checked="" type="checkbox"/> Delete 1702-9TH AVE NORTH SAINT PETERSBURG, FL 33713		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Simonetti, Sharon 3568-4th Ave. SE Largo, FL 33771	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JOCHUM, JANICE <input type="checkbox"/> Delete 14125 YACHT CLUB BLVD SEMINOLE, FL 33776		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer-Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Jochum, Janice 14125 Yacht Club Blvd. Seminole, FL 33776	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Janice C. Jochum Janice C. Jochum 3-6-08 727-595-2766 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					