## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N98000003395

Entity Name: PINELLAS COMMUNITY TELEVISION, INC.

FILED Sep 10, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 504 POINSETTA ROAD 320 ISLAND WAY BELLEAIR, FL 33756 520 CLEARWATER, FL 33767 **Current Mailing Address: New Mailing Address:** PO BOX 661 LARGO, FL 337790661 US FEI Number: 59-3523349 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUDANO, CONNIE C MUDANO, CONNIE C 504 POINSETTA ROAD 320 ISLAND WAY BELLEAIR, FL 33756 US 520 CLEARWATER, FL 33767 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: 09/10/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MUDANO, CONNIE C Name: Name: 504 POINSETTA ROAD Address: Address: City-St-Zip: BELLEAIR, FL 33756 City-St-Zip: Title: () Delete Title: () Change () Addition DOWNEY, LIBBY Name: Name: Address: 1964 ALLARD DRIVE Address: City-St-Zip: CLEARWATER, FL 33763 City-St-Zip: Title: () Delete Title: () Change () Addition JOCHUM, JANICE Name: Name: 14125 YACHT CLUB BLVD. Address: Address: City-St-Zip: SEMINOLE, FL 33776 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition RIGGIN, MARY F Name: Name: 3339 BRIARWOOD CIRCLE Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: ( ) Delete Title: () Change () Addition ASHWORTH, JAY R Name: Name: 4331 63RD WAY N Address: Address: SAINT PETERSBURG, FL 33709 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition MCLAIN, WILLÍAM L Name: Name: Address: 13246 MADISON AVE Address: LARGO, FL 33773 City-St-Zip: 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: MARY RIGGIN VP 09/10/2003