

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000013684

FILED
Feb 19, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA CABLE COMMUNICATIONS, INC.

Current Principal Place of Business:

6331 ALL AMERICAN BOULEVARD
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

200 S. ORANGE AVE., STE 2300
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 52-2296207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A.G.C.CO.
200 S. ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GAULT, DONALD J
Address: 1421 LANGHAM TERRACE
City-St-Zip: HEATHROW, FL 32746

Title: CEO () Delete
Name: GAULT, JOHN F
Address: 136 JONATHAN DR
City-St-Zip: STAMFORD, CT 06903

Title: VS () Delete
Name: GAULT-WELT, KAREN T
Address: 157 MOUNTAIN WOOD RD
City-St-Zip: STAMFORD, CT 06903

Title: V () Delete
Name: GAULT, KEVIN F
Address: 1760 HOLLAND COURT
City-St-Zip: ALAQUA LAKES, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: GAULT-WELT, KAREN T
Address: 157 MOUNTAIN WOOD RD
City-St-Zip: STAMFORD, CT 06903

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON GAULT

P

02/19/2009

Electronic Signature of Signing Officer or Director

_____ Date