## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000014118

Entity Name: TREASURE COAST TELEVISION, INC.

FILED Jul 12, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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 2421 S E DIXIE HWY
 8420 SOUTH U.S. HIGHWAY 1

 STUART, FL 34996
 PORT ST LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

2421 S E DIXIE HWY 8420 SOUTH U.S. HIGHWAY 1 STUART, FL 34996 PORT ST LUCIE, FL 34952

FEI Number: 26-0035721 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:

KORKER, COURTLAND T
2421 S E DIXIE HWY
8420 SOUTH U.S. HIGHWAY 1
STUART, FL 34996 US
PORT ST LUCIE, FL 34952 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: COURTLAND T KORKER 07/12/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition KORKER, FRED C KORKER, COURTLAND T Name: Name: 3066 SE MIRACLE LANE Address: 8420 SOUTH U.S. HIGHWAY 1 Address: City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: PORT ST. LUCIE, FL 34952

Title: VP ( ) Delete Title: P (X) Change ( ) Addition Name: KORKER, COURTLAND T Name: WOMACK, JUDI

 Name:
 KORKER, COURTLAND T
 Name:
 WOMACK, JUDI

 Address:
 15967 N 110TH AVE
 Address:
 15967 N 110TH AVE

City-St-Zip: JUPITER, FL 33478 City-St-Zip: 8420 SOUTH U.S. HIGHWAY 1, FL 34952

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STANKOSKI, MICHAEL
 Name:

 Address:
 104 LOMAS CT
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34952
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDI WOMACK VP 07/12/2005