

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079951

Entity Name: ACME CABLE INC

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

5539 W. ALAMEDA LN
CRYSTAL RIVER, FL 34429 US

New Principal Place of Business:

7531 W. SEVEN RIVERS DR
CRYSTAL RIVER, FL 34429 US

Current Mailing Address:

5539 W. ALAMEDA LN
CRYSTAL RIVER, FL 34429 US

New Mailing Address:

7531 W. SEVEN RIVERS DR
CRYSTAL RIVER, FL 34429 US

FEI Number: 43-2051669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, JEFFREY R
5539 W ALAMEDA LN
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

JOHNSON, JEFFREY R
7531 W. SEVENRIVERS DR.
CRYSTAL RIVER, FL 34429 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:

02/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, JEFFREY R
Address: 5539 W ALAMEDA LN
City-St-Zip: CRYSTAL RIVER, FL 34429 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JOHNSON, JEFFREY R
Address: 7531 W. SEVEN RIVERS DR.
City-St-Zip: CRYSTAL RIVER, FL 34429 US

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: JEFFF JOHNSON

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

Date