

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000118648

FILED
Feb 06, 2006
Secretary of State

Entity Name: CONTINENTAL BROADBAND FLORIDA, INC.

Current Principal Place of Business:

150 W BRAMBLETON AVE
NORFOLK, VA 23510

New Principal Place of Business:

Current Mailing Address:

150 W BRAMBLETON AVE
NORFOLK, VA 23510

New Mailing Address:

FEI Number: 20-1511951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324 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: D/P () Delete
Name: ANSTROM, DECKER
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

Title: D () Delete
Name: BATTEN, FRANK JR
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

Title: DVPS () Delete
Name: FRIDDELL, GUY R
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

Title: AS () Delete
Name: GOETZ, SUSAN J
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANSTROM, DECKER
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

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

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

Title: AS (X) Change () Addition
Name: GOETZ, SUSAN S
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

Title: P () Change (X) Addition
Name: WATKINS, CHARLES L
Address: 150 W BRAMBLETON AVE
City-St-Zip: NORFOLK, VA 23510

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN S. GOETZ

AS

02/06/2006

Electronic Signature of Signing Officer or Director

_____ Date