

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09770

FILED  
Apr 17, 2012  
Secretary of State

**Entity Name:** COMCAST OF WEST FLORIDA, INC.

**Current Principal Place of Business:**

1701 JOHN F KENNEDY BLVD  
PHILADELPHIA, PA 191032838 US

**New Principal Place of Business:**

**Current Mailing Address:**

1701 JOHN F KENNEDY BLVD  
PHILADELPHIA, PA 191032838 US

**New Mailing Address:**

**FEI Number:** 59-2636533

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SMIT, NEIL  
Address: 1701 JOHN F KENNEDY BLVD.  
City-St-Zip: PHILADELPHIA, PA 191032838

Title: V  
Name: DONNELLY, THOMAS J  
Address: 1701 JOHN F KENNEDY BLVD.  
City-St-Zip: PHILADELPHIA, PA 191032838

Title: VSD  
Name: BLOCK, ARTHUR  
Address: 1701 JOHN F KENNEDY BLVD  
City-St-Zip: PHILADELPHIA, PA 191032838

Title: T  
Name: DORDELMAN, WILLIAM E  
Address: 1701 JOHN F KENNEDY BLVD  
City-St-Zip: PHILADELPHIA, PA 191032838

I hereby 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 all other like empowered.

SIGNATURE: THOMAS J DONNELLY

VP

04/17/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date