


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P28789

1. Entity Name
HUNTSVILLE TELEVISION ACQUISITION CORP.



Principal Place of Business Mailing Address

915 MIDDLE RIVER DRIVE 915 MIDDLE RIVER DRIVE
SUITE 409 SUITE 409
FT. LAUDERDALE, FL 33304 FT. LAUDERDALE, FL 33304



04252005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
65-0159031 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANT COMMUNICATIONS
915 MIDDLE RIVER DRIVE, SUITE 409
FT. LAUDERDALE, FL 33304

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE CT CORPORATION DATE 4/26/05
Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PST
NAME	GRANT, MILTON
STREET ADDRESS	2100 S. OCEAN LANE, #1912
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	D
NAME	GRANT, MILTON
STREET ADDRESS	2100 S. OCEAN LANE, #1912
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	AS
NAME	RYAN, MARK P
STREET ADDRESS	1217 ORANGE ISLE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000340759
04/28/05-80129-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK P RYAN DATE 4/26/05 DAYTIME PHONE # 954 568 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR