## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P28790

FILED Jun 08, 2007 Secretary of State

Entity Name: HUNTSVILLE TELEVISION MANAGEMENT CORPORATION

Current Principal Place of Business:		New Principal Place of Business:		
	LE RIVER DRI	VΕ		
SUITE 409 FT. LAUD	) ERDALE, FL 3	33304		
	lailing Addres		New Mailing Addres	ss:
	•			
315 MIDDI SUITE 409	LE RIVER DRI' )	VE		
	ERDALE, FL 3	33304		
El Number	: 63-1019941	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
915 MIDDI	OMMUNICATI LE RIVER DRI' ERDALE, FL 3	VE, SUITE 409		
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	submits this statement for the particles of Registered Ag		ed office or registered agent, or both,  Date
n the State SIGNATUI	e of Florida.  RE: Electror  ce with s. 607.19	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no	ent	ed office or registered agent, or both,  Date
n the State SIGNATUI n accordan Election Cal	e of Florida.  RE: Electror  ce with s. 607.19	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.	
n the State SIGNATUI n accordan Election Cal	e of Florida.  RE: Electror  ce with s. 607.19  mpaign Financing  S AND DIREC	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ). TORS: Delete N, N LANE,#1912	ent ot receive the prior notice.	Date
n the State SIGNATUI  n accordan Election Car  DFFICER Title: Name: Address:	e of Florida.  RE:  Electror  ce with s. 607.19  mpaign Financing  S AND DIREC  PST ()  GRANT, MILTO 2100 S. OCEAN  FT. LAUDERDA	nic Signature of Registered Agra(2)(b), F.S., the corporation did not grow that the contribution ( ).  TORS:  Delete  N, NLANE,#1912 NLE, FL Delete N, NLANE,#1912	ent of receive the prior notice.  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: MARK P RYAN AS 06/08/2007