

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28796

FILED  
Feb 14, 2008  
Secretary of State

Entity Name: MILES MEDIA GROUP, INC.

## Current Principal Place of Business:

6751 PROFESSIONAL PARKWAY WEST  
SARASOTA, FL 34240

## New Principal Place of Business:

## Current Mailing Address:

6751 PROFESSIONAL PARKWAY WEST  
SARASOTA, FL 34240

## New Mailing Address:

FEI Number: 65-0163180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, PARKER, HARRISON, DIETZ  
200 S. ORANGE AVE.  
SARASOTA, FL 34236 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: PD ( ) Delete  
Name: MILES, ROGER W  
Address: 6751 PROFESSIONAL PKY WEST  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: COMEY, ROBERT A  
Address: 101 SECOND ST SE #800  
City-St-Zip: CEDAR RAPIDS, IA

Title: V ( ) Delete  
Name: BERLIN, STEPHEN  
Address: 6751 PROFESSIONAL PKWY WEST  
City-St-Zip: SARASOTA, FL 34240

Title: V ( ) Delete  
Name: WINKLE, PAUL  
Address: 6751 PROFESSIONAL PKWY WEST  
City-St-Zip: SARASOTA, FL 34240

Title: VST ( ) Delete  
Name: BARTENS, WILLIAM  
Address: 6751 PROFESSIONAL PKWY W  
City-St-Zip: SARASOTA, FL 34240

Title: D (X) Delete  
Name: LEE, CHRISTOPHER  
Address: 1100 WILSON BLVD., #3000  
City-St-Zip: ARLINGTON, VA 22209

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: WILLIAM BARTENS

VST

02/14/2008

Electronic Signature of Signing Officer or Director

Date