2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# P32550

Entity Name: ANCHOR BAY COMMUNICATIONS, INC.

Current Principal Place of Business:

9541 CYPRESS LAKE DR
FT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

9541 CYPRESS LAKE DRIVE
FT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 22-3014267 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERNE, ELLA
ANCHOR BAY COMMUNICATIONS INC.
9541 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919 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: CPD ( ) Delete
Name: BERNE, ELLA D.,
Address: 14761 LAKE OLIVE DRIVE
City-St-Zip: FT MYERS, FL

Title: VSD ( ) Delete
Name: EDDY, HERBERT B.,
Address: 5471 HARBORAGE DRIVE
City-St-Zip: FT MYERS, FL

Title: T ( ) Delete
Name: BERNE, ELLA B.,
Address: 14761 LAKE OLIVE DRIVE
City-St-Zip: FT MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change ( ) Addition
Name: BERNE, ELLA D.,
Address: 14761 LAKE OLIVE DRIVE
City-St-Zip: FT MYERS, FL 33919

Title: VSD (X) Change ( ) Addition
Name: EDDY, HERBERT B.,
Address: 5471 HARBORAGE DRIVE
City-St-Zip: FT MYERS, FL 33908

Title: T (X) Change ( ) Addition
Name: BERNE, ELLA B.,
Address: 14761 LAKE OLIVE DRIVE
City-St-Zip: FT MYERS, FL 33919

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: ELLA BERNE PRES 01/04/2008

Electronic Signature of Signing Officer or Director Date