## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 25, 2008 8:00 am Secretary of State

04-25-2008 90111 023 \*\*\*150.00

DOCUMENT # P37277  1. Entity Name COMCAST OF THE GULF PLAINS, INC.							90111 (	023 ***150.00
Principal Place of Business		Mailing Address		31000	1004			
1500 MARKET ST Philadelphia, pa 19102-2148 us		1500 market st Tax dept Philadelphia, pa 19102-2148 us		1 (88) (88) (88)	Hille suura liukt luuti lu	SI DIDII BIDII	RIRIF RIDIK BYRKI BIGKIRDI II IROL	
Principal Place of Business - No P.O. Box #		3. Mailing Address						
1701 JOHN F KENNEDY BLVD		1701 JOHN F.KENNEDY BLVD			1 100,000,100	1411: 18 BIN 18 H 4 E BIT 18:	ai Bibii Bibii	atet. albit atett åtetibet (1 fall)
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04152008	Chg-P	CR2	E034 (12/06)	
City & State		City & State		4. FEI Number			Applied For	
PHILADELPHIA PA		PHILADELPHIA PA		59-2638	402		Not Applical	
Zip 19103-2838	Country USA	7in 19103-2838	Counti	USA	5. Certificate o	Status Desired		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			I		7. Name and A	Address of New I	Registere	d Agent
CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD.				Name Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION, FL 3			Ī					
			City FL Zip Code			Zip Code		
<ol><li>The above named entit the obligations of regis</li></ol>	ty submits this statement leading agent.	or the purpose of changing its	s registere	d office or register	ed agent, or both	, in the State of Fi	forida. La	m tamiliar with, and acce
SIGNATURE								
Signature, typed	d or printed name of registered agen	t and this it applicable. (NOT	IE: Regisiered	Agent signature required	when reinstating)		DATE	
	FEE IS \$150.00	9, Election Campa Trust Fund Cont	-	J \\	.00 May Be			

FILE NOW!!! FEE IS \$150.00	9. Election (
After May 1, 2008 Fee will be \$550.00	Trust Fun

10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete Change Addition BURKE, STEPHEN B NAME NAME STREET ADDRESS 1500 MARKET ST STREET ADDRESS 1701 JOHN F KENNEDY BLVD CITY-ST-ZIP PHILADELPHIA, PA 191022148 CITY-ST-ZIP PHILADELPHIA PA 19103-2838 TITLE Defete TITLE Change Addition NAME BACKSTROM, STEPHEN NAME STREET ADDRESS 1500 MARKET ST. STREET ADDRESS 1701 JOHN F KENNEDY BLVD CITY-ST-ZEP PHILADELPHIA, PA 191022148 CITY-ST-ZIP PHILADELPHIA PA 19103-2838 TITLE ☐ Detete TITLE Change Addition NAME BLOCK, ARTHUR R NAME STREET ADDRESS 1500 MARKET ST STREET ADDRESS 1701 JOHN F KENNEDY BLVD CITY-ST-7/P PHILADELPHIA, PA 191022148 CITY-ST-ZIP PHILADELPHIA PA 19103-2838 TITLE ☐ Delete TITLE Change ALCHIN, JOHN R NAME NAME KENNETH MIKALAUSKAS STREET ADDRESS 1500 MARKET ST STREET ADDRESS 1701 JOHN F KENNEDY BLVD CITY-ST-ZIP PHILADELPHIA, PA 191022148 CITY-ST-7IP PHILADELPHIA PA 19103-2838 THEF Delete TITLE Change ☐ Addition BLOCK, ARTHUR R NAME NAME 1500 MARKET ST STREET ADDRESS STREET ADDRESS 1701 JOHN F KENNEDY BLVD PHILADELPHIA, PA 191022148 CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19103-2838 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. STEPHEN BACKSTROM, VP

215-286-7557