

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000060533

FILED
Mar 02, 2005
Secretary of State

Entity Name: CUMMINGS MEDIA GROUP, INC.

Current Principal Place of Business:

550 N REO ST
STE 300
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

P O BOX 1241
BARTOW, FL 33830 US

New Mailing Address:

P O BOX 1704
BARTOW, FL 33831 US

FEI Number: 59-3395673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CUMMINGS, MICHAEL L
1110 GAUSE AVENUE
BARTOW, FL 33830 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: PC () Delete
Name: CUMMINGS, MICHAEL L
Address: 1110 GAUSE AVENUE
City-St-Zip: BARTOW, FL

Title: ST () Delete
Name: SCOTT, PAMELA Y
Address: 6604 N 33RD ST
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCS (X) Change () Addition
Name: CUMMINGS, MICHAEL L
Address: 1110 GAUSE AVENUE
City-St-Zip: BARTOW, FL

Title: T (X) Change () Addition
Name: SCOTT, PAMELA Y
Address: 6604 N 33RD ST
City-St-Zip: TAMPA, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL L. CUMMINGS

P

03/02/2005

Electronic Signature of Signing Officer or Director

Date