## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000088297

Entity Name: FLORIDA TELEVISION BROADCASTING, INC.

FILED Apr 30, 2009 Secretary of State

•						
Current Principal Place of Business: HWY. 53 S. MADISON, FL 32340			New Prince	New Principal Place of Business:		
				1695 SOUTH SR 53 MADISON, FL 32340		
Current N	lailing Addres	ss:	New Maili	New Mailing Address:		
PO BOX 4 MADISON	127 I, FL 32341					
FEI Number	: 59-3541970	FEI Number Applied For()	FEI Number Not App	olicable ( ) Certificate of Status Desired (	)	
Name and	d Address of (	Current Registered Agent:	Name and	Address of New Registered Agent:		
GREENE, TOMMY HWY. 53 S. MADISON, FL 32340 US			1695 SOÚ	GREENE, TOMMY 1695 SOUTH SR 53 MADISON, FL 32340 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing	its registered office or registered agent, or b	ooth,	
SIGNATURE:				04/30/2009		
	Electron	nic Signature of Registered Ag	ent	Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIREC	CTORS	
Title: Name: Address: City-St-Zip:	P ( GREENE, TOM SR 53 SOUTH MADISON, FL		Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition GREENE, TOMMY 1695 SOUTH SR 53 MADISON, FL 32340		
Title: Name: Address: City-St-Zip:	V ( GREENE, NOL 2130 S SR 53 MADISON, FL		Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition GREENE, NOLAND J 2130 S SR 53 MADISON, FL 32340		
Title: Name: Address: City-St-Zip:	PALHOF, LATE	HOMAS CHURCH RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	T ( KINSLEY, EME 548 SE GULF / MADISON, FL	AVE.	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition GREENE, EMERALD 548 SW EMERALD DR. MADISON, FL 32340		

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: TOMMY GREENE P 04/30/2009