

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020942

Entity Name: TV NEWS CLIPS, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

511 SW RIVERPOINT DR N
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

301 GRANVILLE DR
SILVER SPRING, MD 20901

New Mailing Address:

FEI Number: 65-0901585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERMAN, SCOTT
511 SW RIVERPOINT DR N
STUART, FL 34994 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: PVST () Delete
Name: WALTERMAN, SCOTT
Address: 301 GRANVILLE DR
City-St-Zip: SILVER SPRING, MD 20901

Title: D () Delete
Name: WALTERMAN, SCOTT
Address: 301 GRANVILLE DR
City-St-Zip: SILVER SPRING, MD 20901

Title: V () Delete
Name: SILKEBAKKEN, ERIK
Address: 511 SW RIVERPOINT DR N
City-St-Zip: STUART, FL 34994

Title: V (X) Delete
Name: ANTINORI, MARK
Address: 6909 FREEPORT ROAD
City-St-Zip: RIVERVIEW, FL 33569

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:

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: SCOTT WALTERMAN

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03/24/2009

Electronic Signature of Signing Officer or Director

Date