

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000032237

FILED
Apr 29, 2009
Secretary of State

Entity Name: MADISON RIVER CORPORATION

Current Principal Place of Business:

370 CAMINO GARDENS BLVD
STE 101
BOCA RATON, FL 33432

New Principal Place of Business:

6574 N STATE RD 7
147
COCONUT CREEK, FL 33073

Current Mailing Address:

121 SALEM ST
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

6574 N STATE RD 7
147
COCONUT CREEK, FL 33073

FEI Number: 65-0919393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, CARLTON
121 SALEM ST
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

NELSON, CARLTON
6574 N STATE RD 7
147
COCONUT CREEK, FL 33073 US

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: CARLTON NELSON

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NELSON, CARLTON M
Address: 370 CAMINO GARDENS BLVD
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NELSON, CARLTON M
Address: 6574 N STATE RD 7 # 147
City-St-Zip: COCONUT CREEK, FL 33073

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: CARLTON NELSON

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date