## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # S25543

(7)

CABLE CORPORATION OF AMERICA

FILED
Apr 23 1997 8:00am
Secretary of State

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Principal Place of Business Mailing Address					I TEGITETE CON TINGLE BILLY CHEST AND STATE STATE AND CONTRACT AND CON		
6076 CLARK	CENTER AVE.	6076 CLARK CENTER AVE. SUITE 2					
SUITE 2							
SARASOTA F	L 34238	SARASOTA FL 34238-271	0		6 Date to expersion of Outlified	3a. Date of Last Report	
					3. Date Incorporated or Qualified	02/19/1996	
A D	Place of Business	2a. Mailing Address	······		01/16/1991 4. FEI Number		
· · · · · · · · · · · · · · · · · · ·	Frace of Business	— <u> </u>			65-0242983	Applied For	
Suite, Ap	t to the	26			0070242803	Not Applicable	
	υ π, eic		n. w, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & St	o An	City & State				<del></del>	
—ı ´	a(t)	·			6. Election Campaign Financing	\$5.00 May Be Added to Fees	
<b>23</b> Z(p	Country	28 Zip	Country	,	Trust Fund Contribution		
24	<u></u>	<u> </u>	30		This corporation has liability for Florida Statutes	Intangible tax under s. 199.032, Yes No	
24	25 9. Name and Address of Cu	rent Registered Agent	[30]	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	100 (44)	
		Helit Legistolen Hästit	81	Name	(U. Italija sliu Kuuleas VI Itali Ila	Sista on when	
	MARSHALL, KENNETH L			1,44,110	eet Address (P.O. Box Number is Not Acceptable)		
6076 CLARK CENTER AVE 1			82	Street Ad-			
SA	SARASOTA FL 34238			<u> </u>			
			83				
			84	City		B5 Zip Code	
						FL   '	
11. Pursuar	nt to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	ites, the abov	e-named co	proporation submits this statement for the p	ourpose of changing its registered	
ernde di agent. I	r registered agent, or both, in the 5 I am familiar with, and accept the ol	late of Florida. Such change was bligations of, Section 607.0505, F	Torida Statute	y ine corpor s.	orporation submits this statement for the pation's board of directors. I hereby accept	ot the appointment as registered	
SIGNATURE		_					
SIGNATIONS	Signature, typed or printed name of registere	d agent and the if applicable (NC	TE. Registered Ag	ent signature req	juired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD DELE MARSHALL, KENNETH L		E 1.1 TIRLE			Change Addition	
NAME			1.2 NAME				
STREET ADDRESS 6076 CLARK CENTER AVE 2		2	1.3 STREE	ADDRESS			
CITY-ST-ZIP	SARASOTA FL		1.4 CITY~	ST-24P			
TITLE	SD DELETE		2.1 TITLE			Change Addition	
NAME	HANSEN, E. PAUL		2.2 NAME				
STREET ADDRESS	AND ALIDE OFFER ALE A		2.3 STAEE	ADDRESS			
COTY+ST-ZIP	OADAGGTA FI		2. 4 CITY-	ST-7IP			
TITLE	TD OFLETE		3.1 DTLE			Change Addition	
NAME	COMMON, JOSEPH B.		3.2 NAME				
}	6076 CLARK CENTER AVENUE SUITE 2			T ADDRESS			
TITLE	OATHOU IA FL	DELETE	3.4 CITY- 4.1 TITLE	gi-zir	5	Change X Addition	
		_ otter	4.2 NAME		HILL, JOHN C	tund Orango Last regimen	
1	NAME STREET ADDRESS			]	4140 CENTER GATE BLVD. SARASOTA, FL 34233		
				T ADDRESS			
CITY - ST - ZIP	<b></b>	[] per etr	4.4 CITY -	ST-ZIP	SULVENTA LT 24522		
TITLE		☐ DELETE	5 1 TITLE			Change Addition	
NAME			5.2 NAME	Ī			
STREET ADDRES	S		53 STREE	T ADDRESS			
CITY-ST-ZIP			54 CITY-	ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information indicated on this arinual report or supplemental annual 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 12 or Block 13 if shanged, or or an attachment with an address.

6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE.

TITLE NAME

STREET ADDRESS

CONTRACTOR OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1-20-97

Daylime Phone #

Change

Addition