

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S80206

FILED
May 05, 2004
Secretary of State

Entity Name: KNOLOGY OF PANAMA CITY, INC.

Current Principal Place of Business:

2149 NORTH SHERMAN AVENUE
PANAMA CITY, FL 32405

New Principal Place of Business:

13200 PANAMA CITY BEACH PKWY
PANAMA CITY, FL 32407

Current Mailing Address:

1241 OG SKINNER DR
WEST POINT, GA 31833 US

New Mailing Address:

FEI Number: 59-3479873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012607 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: JOHNSON, RODGER L
Address: 1241 OG SKINNER DR
City-St-Zip: WEST POINT, GA 31833

Title: VCFO () Delete
Name: MILLS, ROBERT K
Address: 1241 OG SKINNER DR
City-St-Zip: WEST POINT, GA 31833

Title: VP () Delete
Name: BOCCUCCI, FELIX L JR
Address: 1241 O.G. SKINNER DRIVE
City-St-Zip: WEST POINT, GA 31833

Title: D () Delete
Name: SCOTT, WILLIAM H.
Address: 3300 20TH AVENUE
City-St-Zip: VALLEY, AL 36854

Title: D () Delete
Name: CAMPBELL, LANIER III
Address: 3300 20TH AVENUE
City-St-Zip: VALLEY, AL 36854

Title: VPS () Delete
Name: CHAD, WACHTER S
Address: 1241 OG SKINNER DRIVE
City-St-Zip: WEST POINT, GA 31833

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:

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 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: ROBERT K. MILLS

CFO

05/05/2004

Electronic Signature of Signing Officer or Director

_____ Date