FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000003167 (3)**

1. Corporation Name

CABLE HEALTHCARE HOLDING, INC.

Principal Place of Business

4030 BRAKER LANE W., #175
AUSTIN TX 78759

Mailing Address

4030 BRAKER LANE W., #175
AUSTIN TX 78759

3. Date Incorporated or Qualified: **06/16/1994**

3a. Date of Last Report: **07/11/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
County
25 TRAVIS

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
County
30 TRAVIS

4. FEI Number: ~~APPLIED FOR~~ 74-2710152 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Required When Reinstating, Changing Registered Agent/Office or Both) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title / Name / Street Address / City-St-Zip	P CUNNINGHAM, KEITH J 4030 BRAKER LANE W., #175 AUSTIN TX 78759 ☒ DELETE	1 Title / 2 Name / 3 Street Address / 4 City-St-Zip	☐ Change ☑ Addition President/CEO Norman M Jasker 4030 Braker Lane West #175 Austin, TX 78759
Title / Name / Street Address / City-St-Zip	AS HEDRICK, JOHN R 4030 BRAKER LANE W., #175 AUSTIN TX 78759 ☐ DELETE	1 Title / 2 Name / 3 Street Address / 4 City-St-Zip	☐ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	SV CINI, THOMAS J JR 4030 BRAKER LANE W., #175 AUSTIN TX 78759 ☐ DELETE	1 Title / 2 Name / 3 Street Address / 4 City-St-Zip	☑ Change ☐ Addition Vice Pcesident
Title / Name / Street Address / City-St-Zip	SV SHERMAN, MARK C 4030 BRAKER LANE W., #175 AUSTIN TX 78759 ☐ DELETE	1 Title / 2 Name / 3 Street Address / 4 City-St-Zip	☐ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	SV HOLLEY, BRYAN R 4030 BRAKER L;ANE N 175 AUSTIN TX ☒ DELETE	1 Title / 2 Name / 3 Street Address / 4 City-St-Zip	☐ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	VAST YORE, KATIE L 4030 BRAKER LANE W., #175 AUSTIN TX ☒ DELETE	1 Title / 2 Name / 3 Street Address / 4 City-St-Zip	☐ Change ☑ Addition Vice President/Treasurer Randall G. Jenkers 4030 Braker Lane West #175 Austin TX 78759

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 a director or officer 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 changed or added above or on an attached sheet with an address.

SIGNATURE: _____ (512) 794-2000

SIGNATURE AND TYPED OR PRINTED NAME OF DESIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Norman M. Jasker