

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
04 FEB 20 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # S36777

1. Entity Name
PALM BEACH GROUP CABLE, INC.

Principal Place of Business
**1 NORTH MAIN STREET
COUDERSPORT, PA 16915 US**

Mailing Address
**1 NORTH MAIN STREET
COUDERSPORT, PA 16915 US**



2. Principal Place of Business
5619 DTC Parkway

Suite, Apt. #, etc.
Suite 800

City & State
Greenwood Village, CO

3. Mailing Address
Same

Suite, Apt. #, etc.

01222004 Chg-P CR2E034 (10/03)

4. FEI Number
25-1660392

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COOPER, RON 1 NORTH MAIN STREET COUDERSPORT, PA 16915 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP SONNENBERG, BRAD 1 NORTH MAIN STREET COUDERSPORT, PA 16915 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT MORRIS, CHRISTINE 1 NORTH MAIN STREET COUDERSPORT, PA 16915 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SCHLEYER, WILLIAM 1 NORTH MAIN STREET COUDERSPORT, PA 16915 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS ARIAS, MARIA 1 NORTH MAIN STREET COUDERSPORT, PA 16915 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT MACDONALD, SCOTT 1 NORTH MAIN STREET COUDERSPORT, PA 16915 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SEE EXHIBIT A ATTACHED HERETO FOR LIST OF OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 700029143757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathy L. Waterman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/04 (303) 268-6300
Date Daytime Phone #

Kathy L. Waterman, Assistant Secretary

EXHIBIT A
OFFICERS AND DIRECTORS

<u>Name</u>	<u>Title</u>	<u>Address</u>
William T. Schleyer	Chief Executive Officer and Director	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Ron Cooper	President and Director	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Brad Sonnenberg	Executive Vice President, General Counsel and Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Vanessa Wittman	Executive Vice President, Chief Financial Officer, Treasurer and Director	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
James Zerefos	Vice President and Assistant Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Patty Conroy	Assistant Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Kathy L. Waterman	Assistant Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032
REFERENCE : 450396 7389086
AUTHORIZATION : Patricia Pizutto
COST LIMIT : \$ 150.00

ORDER DATE : February 19, 2004
ORDER TIME : 11:34 AM
ORDER NO. : 450396-060
CUSTOMER NO: 7389086
CUSTOMER: Kathy L. Waterman
Adelphia Communications
Suite 800
5619 Dtc Parkway
Greenwood Villa, CO 80111

ANNUAL REPORT FILING

NAME: PALM BEACH GROUP CABLE, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: _____

RECEIVED
04 FEB 20 PM 1:04
DIVISION OF CORPORATION