

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 15 PM 3:08

DOCUMENT # S36777 (8)
1. Corporation Name
PALM BEACH GROUP CABLE, INC.

Principal Place of Business Mailing Address
P.O. BOX 472 COUDERSPORT PA 16915 **P.O. BOX 472 COUDERSPORT PA 16915**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		25		03/11/1991	02/16/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		25-1660392	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			81	Name	
			82	Street Address (P.O. Box Number is Not Acceptable)	
			83		
			84	City	85
			FL		

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 _____ (Signature, typed or printed name of registered agent and the 9. Applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIGAS, JOHN J.	1.2 NAME	
STREET ADDRESS	5 W. 3RD ST.	1.3 STREET ADDRESS	
CITY- ST- ZIP	COUDERSPORT PA	1.4 CITY- ST- ZIP	
TITLE	DV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIGAS, MICHAEL J.	2.2 NAME	
STREET ADDRESS	5 W. 3RD ST.	2.3 STREET ADDRESS	
CITY- ST- ZIP	COUDERSPORT PA	2.4 CITY- ST- ZIP	
TITLE	DVT	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIGAS, TIMOTHY J.	3.2 NAME	
STREET ADDRESS	5 W. 3RD ST.	3.3 STREET ADDRESS	
CITY- ST- ZIP	COUDERSPORT PA	3.4 CITY- ST- ZIP	
TITLE	DV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIGAS, JAMES P.	4.2 NAME	
STREET ADDRESS	5 W. 3RD ST.	4.3 STREET ADDRESS	
CITY- ST- ZIP	COUDERSPORT PA	4.4 CITY- ST- ZIP	
TITLE	DVS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLIARD, DANIEL R.	5.2 NAME	
STREET ADDRESS	5 W. 3RD ST.	5.3 STREET ADDRESS	
CITY- ST- ZIP	COUDERSPORT PA	5.4 CITY- ST- ZIP	
TITLE	AS	6.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FISHER, RANDALL D	6.2 NAME	
STREET ADDRESS	5 W 3RD ST.	6.3 STREET ADDRESS	
CITY- ST- ZIP	COUDERSPORT PA	6.4 CITY- ST- ZIP	
		VB/AS	
		FISHER, RANDALL D	
		5 W 3RD ST.	
		COUDERSPORT PA 16915	

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 110.07(3)(a), Florida Statutes. I further certify that the information included 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 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 changed, or on an attachment with an address.

SIGNATURE: Randall D. Fisher Randall D. Fisher 2/7/95 (814) 274-9830
(Signature and typed or printed name of signing officer or director)