This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1)
If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E
Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT OFFICE USE ONLY	
DATE RECEIVED	AMOUNT
3-3-25	$
	ALLOCATION NUMBER

Return completed workbook by email to

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.

Licensing Section

Digitally signed by Licensing Section
Date: 2025.03.11 11:09:18 -04'00'

A
Accounting Period

ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))

2024/2 **Period 1 = January 1 - June 30** **Period 2 = July 1 - December 31**

Barcode Data Filing Period (optional - see instructions)

B
Owner

Instructions:
Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.

List any other name or names under which the owner conducts the business of the cable system.

If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.

Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 62137

LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM

Home Town Cable TV LLC

BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)

Blue Stream Fiber

MAILING ADDRESS OF OWNER OF CABLE SYSTEM

12409 NW 35th St
(Number, street, rural route, apartment, or suite number)

Coral Springs, FL 33065
(City, town, state, zip)

C
System

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.

1 **IDENTIFICATION OF CABLE SYSTEM:**

2 **MAILING ADDRESS OF CABLE SYSTEM:**
(Number, street, rural route, apartment, or suite number)
(City, town, state, zip code)

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.