FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11:53

DOCUMENT # **G57881** **(6)**

1. Corporation Name
WEST BOCA CABLEVISION MANAGEMENT CORP.

Principal Place of Business	Mailing Address
360 SOUTH MONROE STREET SUITE 600 DENVER CO 80209	360 SOUTH MONROE STREET SUITE 600 DENVER CO 80209

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/01/1983
3a. Date of Last Report: 06/23/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-2319192 — 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 ROAD
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VAS	11 TITLE	VD	☐ Change ☒ Addition
NAME	MORRIS, CHARLES R,III(D)	12 NAME	BENNIS, JEFFREY D.	
STREET ADDRESS	360 SO MONROE STREET	13 STREET ADDRESS	360 SO MONROE STREET, #600	
CITY-ST-ZIP	DENVER CO	14 CITY-ST-ZIP	DENVER, CO 80209	
TITLE	PTD	21 TITLE	V	☐ Change ☒ Addition
NAME	RIFKIN, MONROE	22 NAME	HATTRU?, STEPHEN E.	
STREET ADDRESS	360 SO MONROE STREET	23 STREET ADDRESS	360 SO MONROE STREET, #600	
CITY-ST-ZIP	DENVER CO	24 CITY-ST-ZIP	DENVER, CO 80209	
TITLE	AS	31 TITLE	D	☐ Change ☒ Addition
NAME	MAUN, LUCILLE	32 NAME	BARBER, GREGORY P.	
STREET ADDRESS	360 S. MONROE STREET	33 STREET ADDRESS	50 KENNEDY PLAZA, FLEET CENTER	
CITY-ST-ZIP	DENVER CO	34 CITY-ST-ZIP	PROVIDENCE, RI 02903	
TITLE	VS	41 TITLE		☐ Change ☐ Addition
NAME	SELTZER, ROGER A	42 NAME		
STREET ADDRESS	360 S. MONROE STREET	43 STREET ADDRESS		
CITY-ST-ZIP	DENVER CO	44 CITY-ST-ZIP		
TITLE	VAT	51 TITLE		☐ Change ☐ Addition
NAME	WAGNER, DALE D.	52 NAME		
STREET ADDRESS	360 S.MONROE STREET	53 STREET ADDRESS		
CITY-ST-ZIP	DENVER CO	54 CITY-ST-ZIP		
TITLE	VD	61 TITLE		☐ Change ☐ Addition
NAME	~~TRAVIS, JUNE~~	62 NAME		
STREET ADDRESS	~~360 S.MONROE STREET~~	63 STREET ADDRESS		
CITY-ST-ZIP	~~DENVER CO~~	64 CITY-ST-ZIP		

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 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: Dale D. Wagner Dale D. Wagner, V.P. 3/24/95 (303) 333-1215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #