

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 856185

Entity Name: ABC CABLE NETWORKS GROUP, INC.**Current Principal Place of Business:**3800 W ALAMEDA AVE
BURBANK, CA 91505**Current Mailing Address:**500 S BUENA VISTA ST
BURBANK, CA 91521-0105 US**FEI Number:** 95-2592972**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIACALONE, MARGARET C
1375 BUENA VISTA DR
4TH FLOOR NORTH
LAKE BUENA VISTA, FL 32830 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title ASST. SECRETARY
Name SOLOMON, AARON H
Address 1170 CELEBRATION BLVD
City-State-Zip: CELEBRATION FL 34747

Title PRESIDENT
Name MARSH, GARY K
Address 3800 W ALAMEDA AVE
City-State-Zip: BURBANK CA 91505

Title ASST. TREASURER
Name BELZER, GREGORY
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521-0105

Title SENIOR VICE PRESIDENT
Name STOWELL, JOHN A
Address 611 NORTH BRAND BLVD
City-State-Zip: GLENDALE CA 91203

Title TREASURER
Name HEADLEY, JONATHAN S
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521-0105

Title DIRECTOR, SECRETARY
Name REED, MARSHA L
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521-0105

Title ASST. SECRETARY
Name SALAMA, MICHAEL
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521-0105

Title ASST. SECRETARY
Name STEED, SHANNA L
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521-0105

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARSHA L REED**SECRETARY****04/23/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date