

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002300

Entity Name: CABLE NEWS NETWORK, INC.**Current Principal Place of Business:**ON CNN CENTER
ATLANTA, GA 30303**Current Mailing Address:**ON CNN CENTER
ATLANTA, GA 30303 US**FEI Number: 51-0386049****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 D/SVP
Name INGRAM, CHERYL E
Address ON CNN CENTER
City-State-Zip: ATLANTA GA 30303

Title D/EVP/S
Name SAMS, LOUISE
Address ON CNN CENTER
City-State-Zip: ATLANTA GA 30303

Title P
Name ZUCKER, JEFFREY
Address ON CNN CENTER
City-State-Zip: ATLANTA GA 30303

Title SVP
Name PHILLIPS, DOUGLAS S.
Address ONE TIME WARNER CENTER
City-State-Zip: NEW YORK NY 10019

Title SVP/T
Name RUGGIERO, EDWARD B
Address ONE TIME WARNER CENTER
City-State-Zip: NEW YORK NY 10019

Title AS
Name CANNON, JANICE
Address ONE TIME WARNER CENTER
City-State-Zip: NEW YORK NY 10019

Title EVP
Name DESROCHES, PASCAL
Address ONE TIME WARNER CENTER
City-State-Zip: NEW YORK NY 10019

Title SVP
Name KAMBOUR, ANNALIESE S.
Address ONE TIME WARNER CENTER
City-State-Zip: NEW YORK, NY NY 10019

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: JANICE CANNON**ASSISTANT SECRETARY 04/27/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date