2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000005752

Entity Name: HC2 BROADCASTING HOLDINGS INC.

Current Principal Place of Business:

450 PARK AVENUE 30TH FLOOR

NEW YORK, NY 10022

Current Mailing Address:

450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

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:

Name

Address

Address

Electronic Signature of Registered Agent

Date

FILED May 21, 2020

Secretary of State

0781780615CC

Officer/Director Detail:

DIRECTOR OF ENGINEERING Title Title COO

TURNER, HENRY TURNER, HENRY Name Name Address 450 PARK AVENUE Address 450 PARK AVENUE 30TH FLOOR

30TH FLOOR

ROULEAU, JEANNE E.

NEW YORK NY 10022 NEW YORK NY 10022 City-State-Zip: City-State-Zip:

Title MANAGING DIRECTOR OF BUSINESS Title ASSISTANT SECRETARY

STRATEGY LEVI. LES

450 PARK AVENUE Address 450 PARK AVENUE

30TH FLOOR 30TH FLOOR

NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022 City-State-Zip:

EXECUTIVE VICE PRESIDENT OF Title Title **SECRETARY** STRATEGY AND POLICY

HANSON, REBECCA HANSON, REBECCA Name

Name

Name

Address 450 PARK AVENUE Address 450 PARK AVENUE

30TH FLOOR 30TH FLOOR

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title GENERAL COUNSEL Title CFO

HANSON, REBECCA MINKOV, IVAN P. Name Name

450 PARK AVENUE 450 PARK AVENUE Address

30TH FLOOR 30TH FLOOR

NEW YORK NY 10022 NEW YORK NY 10022 City-State-Zip: City-State-Zip:

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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.

05/21/2020 SIGNATURE: MICHAEL J. SENA VICE PRESIDENT

Officer/Director Detail Continued:

CEO Title Title

Name SENA, MICHAEL J. Name FALCONE, PHILIP A. Address **450 PARK AVENUE** Address **450 PARK AVENUE**

30TH FLOOR 30TH FLOOR

NEW YORK NY 10022 NEW YORK NY 10022 City-State-Zip: City-State-Zip:

PRESIDENT Title DIRECTOR Title

FALCONE, PHILIP A. FALCONE, PHILIP A. Name Name Address 450 PARK AVENUE Address 450 PARK AVENUE

30TH FLOOR 30TH FLOOR

NEW YORK NY 10022 NEW YORK NY 10022 City-State-Zip: City-State-Zip:

Title **EXECUTIVE CHAIRMAN** Title DIRECTOR

FALCONE, PHILIP A. Name SENA, MICHAEL J. Name Address

450 PARK AVENUE Address 450 PARK AVENUE

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City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022