

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 15, 2001 8:00 am**  
**Secretary of State**

02-15-2001 90102 028 \*\*\*150.00

**DOCUMENT # 653079**

1. Entity Name

**NATIONAL SUBSCRIPTION TELEVISION OF FT. LAUDERDA**

Principal Place of Business

C/O OAK INDUSTRIES INC  
1000 WINTER STREET  
WALTHAM MA 02451

Mailing Address

C/O OAK INDUSTRIES INC  
1000 WINTER STREET  
WALTHAM MA 02451

2. Principal Place of Business

One Riverfront Plaza  
Suite, Apt. #, etc.  
MP-HQ-E2-11

3. Mailing Address

One Riverfront Plaza  
Suite, Apt. #, etc.  
MP-HQ-E2-11 K23A

City & State

Corning, NY

City & State

Corning, NY

Zip

14831-0001

Country

USA.

Zip

14831-0001

Country

USA.

4. FEI Number

95-3448337

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSD  
NAME HICKS, COLEMAN S ☒ Delete  
STREET ADDRESS 1000 WINTER ST  
CITY-ST-ZIP WALTHAM MA

TITLE D  
NAME LEW, MELA ☒ Delete  
STREET ADDRESS 1000 WINTER STREET  
CITY-ST-ZIP WALTHAM MA 02154

TITLE VD  
NAME HYLEK, RANDALL J ☒ Delete  
STREET ADDRESS 1000 WINTER STREET  
CITY-ST-ZIP WALTHAM MA 02154

TITLE VTD  
NAME LEBLANC, PAUL A ☒ Delete  
STREET ADDRESS 1000 WINTER STREET  
CITY-ST-ZIP WALTHAM MA 02154

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P, D  
NAME Zingler, Howard S ☐ Change ☒ Addition  
STREET ADDRESS HP-EB-01 BZA  
CITY-ST-ZIP Corning, NY 14831-0001

TITLE AS  
NAME Hauselt, Denise A. ☐ Change ☒ Addition  
STREET ADDRESS One Riverfront Plaza, MP-HQ-E2 A14A  
CITY-ST-ZIP Corning NY 14831-0001

TITLE VP/T  
NAME Rogus, Mark S ☐ Change ☒ Addition  
STREET ADDRESS One Riverfront Plaza, MP-HQ-E2 Z20A  
CITY-ST-ZIP Corning NY 14831-0001

TITLE S/D/VPJ  
NAME Halton, Vincent P. ☐ Change ☒ Addition  
STREET ADDRESS One Riverfront Plaza, MP-HQ-E2 619A  
CITY-ST-ZIP Corning, NY 14831-0001

TITLE D  
NAME Ecklin, Robert K ☐ Change ☐ Addition  
STREET ADDRESS One Riverfront Plaza, MP-HQ-E2 H11A  
CITY-ST-ZIP Corning, NY 14831-0001

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Denise A Hauselt

DENISE A HAUSELT ASST SECRETARY 2/12/01 607-974-8710

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)