

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 670663

Entity Name: WMOR-TV COMPANY

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

300 WEST 57TH STREET
NEW YORK, NY 10019 US

New Principal Place of Business:

Current Mailing Address:

214 NORTH TRYON STREET
CORPORATE TAX DEPT.-32ND FL.
CHARLOTTE, NC 28202 US

New Mailing Address:

FEI Number: 59-2067541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONOMIKES, JOHN G
Address: 300 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: D () Delete
Name: BARRETT, DAVID J
Address: 300 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: S () Delete
Name: BOSTRON, CATHERINE
Address: 300 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT () Change (X) Addition
Name: DAVID, KORS L
Address: 214 NORTH TRYON STREET
City-St-Zip: CHARLOTTE, NC 28202

Title: VP () Change (X) Addition
Name: HAWKS, HARRY T
Address: 300 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019

Title: AS () Change (X) Addition
Name: LOEB, LARRY M
Address: 300 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID L. KORS

AT

04/29/2009

Electronic Signature of Signing Officer or Director

Date