

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836063

FILED
Apr 15, 2009
Secretary of State

Entity Name: ATLANTA NATIONAL LEAGUE BASEBALL CLUB, INC.

Current Principal Place of Business:

ONE CNN CENTER
BOX 105366
ATLANTA, GA 30348 US

New Principal Place of Business:

Current Mailing Address:

12300 LIBERTY BLVD
ENGLEWOOD, CO 80112 US

New Mailing Address:

FEI Number: 58-1251243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: SCHUERHOLZ, JOHN
Address: ONE CNN CNTR
City-St-Zip: ATLANTA, GA 30348

Title: DSVP () Delete
Name: AARON, HENRY L
Address: ONE CNN CENTER
City-St-Zip: ATLANTA, GA 30303

Title: T () Delete
Name: MOORE, CHIP
Address: ONE CNN CTR
City-St-Zip: ATLANTA, GA 30348

Title: VP () Delete
Name: LENNEMAN, TIM
Address: 12300 LIBERTY BLVD
City-St-Zip: ENGLEWOOD, CO 80112

Title: D () Delete
Name: ROSENTHALER, ALBERT
Address: 12300 LIBERTY BLVD
City-St-Zip: ENGLEWOOD, CO 80112

Title: D () Delete
Name: MAFFEI, GREG
Address: 12300 LIBERTY BLVD
City-St-Zip: ENGLEWOOD, CO 80112

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: () Change () Addition
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City-St-Zip:

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

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

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: TIM LENNEMAN

VP

04/15/2009

Electronic Signature of Signing Officer or Director

Date