

FILED  
May 16, 2001 8:00 am  
Secretary of State

05-16-2001 90247 003 \*\*\*150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 844754

1. Entity Name

JONES INTERCABLE, INC.

Principal Place of Business

1500 MARKET STREET  
PHILADELPHIA PA 19102-2148

Mailing Address

1500 MARKET STREET  
PHILADELPHIA PA 19102-2148

2. Principal Place of Business

3. Mailing Address

1500 Market St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

36th Floor

City & State

City & State

Philadelphia, PA

4. FEI Number

84-0613514

Applied For

Not Applicable

Zip

Country

Zip

19102-2148

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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) ☐

FILED WITH FEE IS \$150.00  
AND MAY 17, 2001 Fee will be \$250.00  
Must Change Records to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C/D  
NAME ROBERTS, RALPH J  
STREET ADDRESS 1500 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19102-2148 ☐ Delete

TITLE C  
NAME Roberts, Ralph  
STREET ADDRESS 1500 Market St.  
CITY-ST-ZIP Philadelphia, PA 19102 ☒ Change ☐ Addition

TITLE P/D  
NAME ROBERTS, BRIAN L  
STREET ADDRESS 1500 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19102-2148 ☒ Delete

TITLE P  
NAME Burke, Stephen B.  
STREET ADDRESS 1500 Market St.  
CITY-ST-ZIP Philadelphia, PA 19102 ☐ Change ☒ Addition

TITLE V/D  
NAME SMITH, LAWRENCE S  
STREET ADDRESS 1500 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19102-2148 ☐ Delete

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

TITLE VTD  
NAME ALCHIN, JOHN R  
STREET ADDRESS 1500 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19102-2148 ☐ Delete

TITLE V/T  
NAME Alchin, John R.  
STREET ADDRESS 1500 Market St.  
CITY-ST-ZIP Philadelphia, PA 19102 ☒ Change ☐ Addition

TITLE VSD  
NAME WANG, STANLEY  
STREET ADDRESS 1500 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19102-2148 ☐ Delete

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

TITLE V  
NAME BLOCK, ARTHUR R  
STREET ADDRESS 1500 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19102-2148 ☒ Delete

TITLE V  
NAME Backstrom, Stephen C.  
STREET ADDRESS 1500 Market St.  
CITY-ST-ZIP Philadelphia, PA 19102 ☐ Change ☒ Addition

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:

C. Stephen Backstrom  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

215 981-7557  
Daytime Phone #

CR2E034 (10/00)