


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

APPROVE
AND
FILED

04 MAY -6 PM 5:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A33051	
1. Entity Name TIME WARNER ENTERTAINMENT COMPANY, L.P., LIMITED PARTNERSHIP	

Principal Place of Business 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	Mailing Address 75 ROCKEFELLER PLAZA C/O JANICE CANNON NEW YORK, NY 10019
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2. Principal Place of Business ONE TIME WARNER CENTER	3. Mailing Address % JANICE CANNON ONE TIME WARNER CENTER
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	14TH FL, LEGAL DEPARTMENT
City & State NEW YORK, NY	City & State NEW YORK, NY
Zip 10019	Country
	10019



04282004 Chg-LP CR2E003 (10/03)

4. FEI Number 13-3666692	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH 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
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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. I am familiar with, and accept the obligations of registered agent.

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

9. Capital Contributions as Shown on record: \$100.00	10. Amount of Capital Contributions in FLORIDA to date.
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F03000001914 TIME WARNER CABLE INC. 290 HARBOR DRIVE STAMFORD, CT 06902	STREET ADDRESS CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	300037572019 06/02/04--01029--015 **150.00
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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Susan A. Waxenberg **SUSAN A. WAXENBERG, ASST. SECY FOR** 4/29/04 212-484-7350
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **TIME WARNER CABLE INC.** Date Daytime Phone #

STAPLE CHECK HERE