

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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**

**FILED**

**03 MAY 16 PM 2:29**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**DUE BY MAY 1, 2003**

4. FEI Number **13-3666692**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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 SOUTH 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions  
as Shown on record. **\$100.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION**

**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 # **840666**  
NAME **AMERICAN TELEVISION AND COMMUNICATIONS COR**  
STREET ADDRESS **75 ROCKEFELLER PLAZA**  
CITY-ST-ZIP **NEW YORK NY 10019**

STREET ADDRESS

CITY-ST-ZIP

**500819184865**  
**05/16/03--01074--003 \*\*150.00**

DOCUMENT # **F95000003270**  
NAME **WARNER COMMUNICATIONS INC.**  
STREET ADDRESS **75 ROCKEFELLER PLAZA**  
CITY-ST-ZIP **NEW YORK NY 10019**

STREET ADDRESS

CITY-ST-ZIP

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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:

**JANICE CANNON** JANICE CANNON, ASST. SECY FOR 4/30/03 212-484-6503

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

ATC & WCI

Date

Daytime Phone #

CR2E003 (10/02)

0006284 AT