

# 2002 UNIFORM BUSINESS REPORT (UBR)

0020040 AB

**DOCUMENT # B01000000406**

1. Entity Name  
**FALCON CABLEVISION, A CALIFORNIA LIMITED PARTNER SHIP**

Principal Place of Business 12405 POWERSCOURT DRIVE ST. LOUIS MO 63131	Mailing Address 12405 POWERSCOURT DRIVE ST. LOUIS MO 63131
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**FILED**  
 02 APR 19 PM 4:36  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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**DUE BY MAY 1, 2002**

4. FEI Number 95-4455183	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**CORPAMERICA, INC.**  
**416 S.E. 15TH STREET**  
**FORT LAUDERDALE FL 33316**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b> 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. <b>\$0.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>0.00</b>	11. <b>MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION</b>
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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

DOCUMENT #	<b>M00000002521</b>
NAME	<b>CHARTER COMMUNICATIONS VII, LLC</b>
STREET ADDRESS	<b>12405 POWERSCOURT DRIVE</b>
CITY-ST-ZIP	<b>ST. LOUIS MO 63131</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>600005309706--3</b>
CITY-ST-ZIP	
STREET ADDRESS	<b>BK</b>
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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:** *Marcy Lifton*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER** **General Partner**  
**Marcy Lifton, Vice President of Charter Communications VI, LLC** **4/15/2002**  
Date

CR2E003 (9/01)

Kim Doyer

**BOI 000000406**

(2)

ACCOUNT NUMBER: FCA000000005

REFERENCE: (Sub Account) 9602248-5

DATE: 4/19

REQUESTOR NAME: Lexis Document Services

ADDRESS:

TELEPHONE: ( ) ( ) ext ( )

CONTACT NAME:

CORPORATION NAME: Falcon Cablevision, a California LP

DOCUMENT NUMBER: (if applicable) BOI-406

AUTHORIZATION: Cynthia J. Woodyard

BK

2002  
WBR

FILED

02 APR 19 PM 4:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

02 APR 19 PM 3:00

RECEIVED

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-9)
- PLAIN STAMPED COPY

- Call When Ready
- Walk In
- Mail Out
- Call if Problem
- Will Wait
- After 4:30
- Pick Up

141.25