FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVOC	ATION AND \$500 PENALT	Y FEE				
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secrétary of State DIVISION OF CORPORATIONS		FILI	FILED 99 FEB 16 AH ID: 37		
1. Name of Limited Partnership	1a. DOCUMENT # B98000000407		SEURETAKT	St.CRETART OF STATE TALLAHASSEE, FLORIDA		
ORLANDO CABLE ADVERTISINO	G INTERCONNECT,	L.P.				
Malling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital C	Contributions as	
\$880 GREENWOOD PLAZA BLVD: 290 HARBOR DRIVE ENGLEWOOD CO 80111 STAMFORD CT 06902		06/19/1998 3a. Date of Last Report		Shown on record \$0.00		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
160 Inverness Drive West	Suite, Apt. #, etc.		DE	ļ <u>. </u>	<u> </u>	
Suite, Apt. #, etc. City & State	City & State		6. FEI Number 84 - 145 1075		Applied For Not Applicable	
Englewood, CO			7. Certificate of Stalus Desired		\$8.75 Additional Fee Required	
Zip Country	Zip Country		8. Make check payable to Dept. of:	State (See reverse	<u>-</u>	
9. Name and Address of Current Re	rdistand Anent		10. If changed, new Registered	Agent/Office		
		Name	To a contrada to the contrada	/	99	
C T CORPORATION SYSTEM		Street Address (P.O. Box Number Is Not Acceptable)				
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Suite, Apt, #, etc				
4000027864442 -02/24/9901112008		City FL Zip Code				
10a. Pursuant to the provisions of section to the purpose of changing its registered office or registered. I am familiar with, and accept the obligations of	stered agent, or both, in the State of Flori		organized or registered under the laws of the s authorized by its general partner(s). I hereb			
SIGNATURE (Registered Agent Accepting Appointment)			DATE			
A GENERAL PARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED AN	IMITED PA D ACTIVE 1	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSIN	ESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo		b. City, State & Zip Code	11c.	Registration/ Document Number	
TIME WARNER ENTERTNMNT-ADV./	2251 LUCIEN WAY, SUIT		MAITLAND FL 32751		G96128900017	
CABLEVISION INDUSTRIES OF CE	2251 LUCIEN WAY, SUIT		MAITLAND FL 32751		G90839	
CABLEVISION INDUSTRIES LIMIT	2251 LUCIEN WAY, SUIT		MAITLAND FL 32751		A22293	
TWI CABLE INC.	290 HARBOR DRIVE		STAMFORD CT 06902		F96000000 378	
VOLUSIA COUNTY CABLE ADV. IN	6175 N.W. 153RD STREE		MIAMI LAKES FL 33014		B980000000 10 7	
TCI CABLEVISION OF FLORIDA,	6175 N.W. 153RD STREE		MIAMI LAKES FL 33014	J35563		
Note: General partners MAY NOT b	e changed on this form	ı; an amend	lment must be filed to cha	ange a ger	neral partner.	
1 do hereby certify that the information supplied with this is Corporations from any liability of non-compliance with Se this annual report is true and accurate and that my signal empowered to execute this report as required by chapter	ction 119.07(3)(k) in the event that the infi lure shall have the same legal effects as it \$20, Florida Statutes.	ormation supplied is	deemed exempt from public access. I further	certify that the in	formation indicated on	
SIGNATURE / Kul hu	/		DATE	1/12/29	;	