

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90236 016 ***150.00

DOCUMENT #

1. Entity Name

F00000006872

AOL TIME WARNER INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
75 ROCKEFELLER PLAZA

3. Mailing Address
% JANICE CANNON

Suite, Apt. #, etc.
LEGAL DEPT. 25TH FL.

Suite, Apt. #, etc.
75 ROCKEFELLER PLAZA, 25TH FL.

DO NOT WRITE IN THIS SPACE

City & State
NEW YORK, NY

City & State
NEW YORK, NY

4. FEI Number
13-4099534

Applied For
Not Applicable

Zip
10019

Country
USA

Zip
10019

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

City
PLANTATION

FL

Zip Code
33324

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO LEVIN, GERALD M. 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCOO PARSONS, RICHARD D. 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCOO PITTMAN, ROBERT W. 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPGCS CAPPUCCIO, PAUL T. 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPCFO PACE, WAYNE H. 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WAXENBERG, SUSAN A. 75 ROCKEFELLER PLAZA NEW YORK, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Susan A. Waxenberg*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUSAN A. WAXENBERG

4/25/02

Date

Daytime Phone #

CR2E034B (12/01)