

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90126 022 ***150.00

DOCUMENT # F00000006872					
1. Entity Name TIME WARNER INC.					
Principal Place of Business ONE TIME WARNER CENTER NEW YORK, NY 10019			Mailing Address % JANICE CANNON, ONE TIME WARNER CTR. 14TH FLR., LEGAL DEPT. NEW YORK, NY 10019		
2. Principal Place of Business ONE TIME WARNER CENTER		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State NEW YORK, NY		City & State			
Zip 10019	Country USA	Zip	Country	4. FEI Number 13-4099534	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T 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		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D	NAME TURNER, R.E.		TITLE	NAME	
STREET ADDRESS ONE CNN CENTER	CITY-ST-ZIP ATLANTA, GA 30348		STREET ADDRESS	CITY-ST-ZIP	
TITLE EVPC	NAME PACE, WAYNE H		TITLE EVP/CFO	NAME WAYNE H. PACE	
STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019		STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019	
TITLE EVPG	NAME CAPPUCCIO, PAUL T		TITLE EVP/GENERAL COUNSEL	NAME PAUL T. CAPPUCCIO	
STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019		STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019	
TITLE DCEO	NAME PARSONS, RICHARD D		TITLE DIRECTOR/CHAIRMAN/CEO	NAME RICHARD D. PARSONS	
STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019		STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019	
TITLE AT	NAME SOLOMON, JAMES M		TITLE VICE PRESIDENT	NAME JAMES M. SOLOMON	
STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019		STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019	
TITLE AS	NAME WAXENBERG, SUSAN A		12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
STREET ADDRESS ONE TIME WARNER CENTER	CITY-ST-ZIP NEW YORK, NY 10019		JAMES M. SOLOMON VICE PRESIDENT		
SIGNATURE: <i>James M. Solomon</i>			4/28/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		