## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9500003270 (4)

WARNER COMMUNICATIONS INC.

Principal Place of Business 75 ROCKEFELLER PLAZA NEW YORK NY 10019 Mailing Address 75 ROCKEFELLER PLAZA

NEW YORK NY 10019-6908

## **FILED** Apr 24 1997 8:00am Secretary of State



|   |  |   |                 |   | 3. Date Incorporated or Qualified 07/07/1995   | 3a, Dale of Last Report<br>04/24/1996 |                                    |                |
|---|--|---|-----------------|---|--|---------------------------------------|------------------------------------|----------------|
| 2. Principal Pi<br>21   | ace of Business  | 28. Mailing Address<br>26                                     |                 | 4. FEI Number<br>13-2696809                             |  | Applied I<br>Not Appl                 |                                    |                |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.   |                 | 5. Certificate of Status Desired                        | □ <b>\$</b>  | 8.75 Addition<br>Fee Required         |                                    |                |
| Çîty & State<br>23  |  | City & State  |                 | Election Campaign Financing     Trust Fund Contribution |  | \$5.00 May Be Added to Fees           |                                    |                |
| Zip<br>24   | Country 25   | Z <sub>I</sub> p<br>[ <b>29</b> ]                             | Countr          | у   | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No |                                       |                                    |                |
| 9. Name and Address of Current Registered Agent   |  |   |                 |   | 10. Name and Address of New Registered Agent   |                                       |                                    |                |
| Of Oddy Other Other   |  |   |                 | 81 Name   |  |                                       |                                    |                |
| 1200 SOUTH PINE ISLAND RD.  |  |   |                 | B2 Street Address (P.O. Box Number is Not Acceptable)   |  |                                       |                                    |                |
| PLANTATION FL 33324   |  |   |                 |   |  |                                       |                                    |                |
|   |  |   | 83              | 1   |  |                                       |                                    | \              |
|   |  |   | 84              | City  |  | FI B                                  | Zip Code                           |                |
| 11. Pursuant  | to the provisions of Sections 607.0502<br>egistered agent, or both, in the State | and 607.1508, Florida Statut<br>of Florida. Such change was a | es, the above   | re-named corp<br>by the corporal                        | poration submits this statement for the p<br>tion's board of directors. I hereby accep         | 1 20-                                 | nging its regis<br>nent as registe | stered<br>ered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fforida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Fforida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Fforida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTL Registered Agent signature required when retisating)               |  |   |                 |   |  |                                       |                                    |                |
| 12.   | Signature, typed or printed name of registers to ago:  OFFICERS AND              |   | L Registered Ag | ent signature requi                                     | ADDITIONS/CHANGES TO OFFIC   | DATE<br>ERS AND DIS                   | ECTORS IN 1                        | <del></del>    |
| TITLE   | S OFFICERS AINE  | DELETE  | 1.1 TITLE       | <del></del>   | Additions/criangles to office  |                                       |                                    | Addition       |
| NAME  | BRUNO, ELI T   |   | 1.2 NAME        | {   |  |                                       |                                    | }              |
| STREET ADDRESS  | TE DOOMEECH ED DI AZA  |   | 9               | 1 ADORESS   |  |                                       |                                    | }              |
| CITY-ST-ZIP   | NEW YORK NY  |   | 1.4 CITY -      | J   |  |                                       |                                    | 1              |
| TITLE   | AS   | DELETE  | 2.1 Tills       | 31-211  | **************************************   |                                       | Change 1                           | Addition       |
| NAME  | WHITE, MARIE N   |   | 2.2 NAME        | l   |  |                                       | ·                                  | Ì              |
| STREET ADDRESS  | s 75 ROCKEFELLER PLAZA   |   |                 | 1 ADDRESS   |  |                                       |                                    | [              |
| CITY-ST-ZIP   | NEW YORK NY  |   | 2 4 CITY        |   |  |                                       |                                    | 1              |
| TITLE   | 0  | DELFTE  | 3.1 TITLE       |   |  |                                       | Change /                           | Addition       |
| NAME  | LEVIN, GERALD M  |   | 3.2 NAME        | ,   |  |                                       |                                    | }              |
| STREET ADDRESS  | 75 ROCKEFELLER PLAZA   | ER PLAZA  |                 | I ADDRESS   |  |                                       |                                    | ļ              |
| CMY-ST-ZIP  | NEW YORK NY 10019  |   | 3.4 CITY        | ST-ZIP  |  |                                       |                                    | }              |
| TITLE   |  |   | 4.1 TITLE       |   |  |                                       | Change 🔲 A                         | Addition       |
| NAME  | BRESSLER, RICHARD J.   |   | 4. 2 NAM        | : {   |  |                                       |                                    | - (            |
| STREET ADDRESS  | 75 ROCEFELLER PLAZA  |   | 4.3 STREE       | T ADDRESS   |  |                                       |                                    | ĺ              |
| CITY-ST-ZIP   |  |   | 4.4 CITY-       | ST-7IP  |  |                                       |                                    |                |
| TITLE   | DP DADOONS DICHARD D   | ☐ DELFTE  | 5.1 THLE        | ĺ   |  | L                                     | Change 🔲 A                         | Addition (     |
| MAME  | TE DOOKEELIED DIATA  |   | 5.2 N/ME        | 1   |  |                                       |                                    | ł              |
| STREET ADDRESS  | NEW YORK NY 10019  |   | 5.3 STREE       | 1 ADDRESS   |  |                                       |                                    | - {            |
| CITY-ST-ZIP   | V  | T BELLIE  | 5.4 City -      | ST-ZIP  |  | · · · · · · · · · · · · · · · · · · · | Change II                          | Addition       |
| TITLE   | HAYS, SPENCER B  | ☐ DELETE  | 6.1 TITLE       | }   |  | LJ                                    | Change 🔲 A                         | Addition ]     |
| NAME  | 75 ROCKEFELLER PLAZA 638   |   | 6.2 NAME        | ì   |  |                                       |                                    | 1              |
| STREET ADDRESS  |  |   | •               | TADDRESS  |  |                                       |                                    | -              |
| CITY-ST-ZIP   | by cortify that the information supplied   | with this filing does not quali                               | 6.4 City-       | emption state   | d in Section 119.07(3)(i). Florida Statute   | s. I further cer                      | tify that the                      |                |
| 14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. |  |   |                 |   |  |                                       |                                    |                |
| SIGNATURE: David (212) 484-9596 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR White 4/15/97 (212) 484-9596   |  |   |                 |   |  |                                       |                                    |                |