

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90336 038 ***150.00

DOCUMENT # F95000003405

1. Entity Name
DIRECTV, INC.



Principal Place of Business
**2230 EAST IMPERIAL HIGHWAY
EL SEGUNDO, CA 90245**

Mailing Address
**2230 EAST IMPERIAL HIGHWAY
EL SEGUNDO, CA 90245**

14014863



2. Principal Place of Business

3. Mailing Address

2250 E. IMPERIAL HWY

Suite, Apt. #, etc.

RE/R11/N381 TAX DEPT

04262004

Chg-P

CR2E034 (10/03)

City & State

City & State
EL SEGUNDO CA

4. FEI Number

95-4321465

Applied For

Not Applicable

Zip

Country

Zip

90245

Country

USA

5. Certificate of Status Desired ☐

**\$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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **AUSTIN, R.S**
STREET ADDRESS **2230 E. IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **SSPG** ☒ Delete
NAME **HALL, R M**
STREET ADDRESS **2230 E IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **EVP** ☒ Delete
NAME **MEYERS, R L**
STREET ADDRESS **2230 E IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **D** ☒ Delete
NAME **HARTENSTEIN, E W**
STREET ADDRESS **2230 E IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **AS** ☐ Delete
NAME **HATCH, H.J**
STREET ADDRESS **2230 EAST IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **CFO** ☐ Delete
NAME **PALKOVIC, M.W**
STREET ADDRESS **2230 E. IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President & CHIEF EXECUTIVE OFFICER** ☐ Change ☒ Addition
NAME **Mitchell STERN**
STREET ADDRESS **2230 E. IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **Executive V.P., General Counsel & Secretary** ☐ Change ☒ Addition
NAME **DANIEL M. FAWCETT**
STREET ADDRESS **2230 E. IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO CA 90245**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **Mitchell STERN**
STREET ADDRESS **2230 E. IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO CA. 90245**

TITLE **Assistant SECRETARY** ☐ Change ☒ Addition
NAME **JANET L. WILLIAMSON**
STREET ADDRESS **2250 E. IMPERIAL HWY**
CITY-ST-ZIP **EL SEGUNDO CA. 90245**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

JANET L. WILLIAMSON - Assistant Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4-29-04** Daytime Phone #