

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90101 046 ***150.00

DOCUMENT # F96000000378

1. Corporation Name
TWI CABLE INC.



Principal Place of Business

290 HARBOR DR
STAMFORD CT 06902
US

Mailing Address

C/O TWC TAX DEPT
P.O. BOX 6700
ENGLEWOOD CO 80155-6700
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/04/1996

4. FEI Number

59-1353813

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

C/O TWC TAX DEPT.

P.O. BOX 6659

ENGLEWOOD, CO

80155-6659

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 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, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME O'HAYRE, DAVID E
STREET ADDRESS 290 HARBOR DR
CITY-STATE-ZIP STAMFORD CT 06902

☐ DELETE

TITLE VPCF
NAME HARRIS, TOMMY J
STREET ADDRESS 290 HARBOR DR
CITY-STATE-ZIP STAMFORD CT 06902

☐ DELETE

TITLE DV
NAME HAYS, SPENCER B
STREET ADDRESS TIME WARNER, 75 ROCKEFELLER PLAZA
CITY-STATE-ZIP NEW YORK NY 10019

☐ DELETE

TITLE V
NAME ALLAMAN, GAIL L
STREET ADDRESS TIME WARNER CABLE/5680 GREENWOOD PLZ BLVD.
CITY-STATE-ZIP ENGLEWOOD CO 80111

☐ DELETE

TITLE VAS
NAME APFELBAUM, MARC J
STREET ADDRESS 290 HARBOR DR
CITY-STATE-ZIP STAMFORD CT 06902

☐ DELETE

TITLE V
NAME CHRISTIE, WARREN A
STREET ADDRESS TIME WARNER/1271 AVENUE OF THE AMERICAS
CITY-STATE-ZIP NEW YORK NY 10020

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

Allaman, Gail L.
150 Inverness Drive West
Englewood, CO 80112

Christie, Warren A
75 Rockefeller Plaza
New York, NY 10019

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASST. TREASURER 4/29/99 (803) 799-1200

Date

Daytime Phone #

CR2E034 (1/98)