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FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000002957 (6)

1. Corporation Name

BRESNAN COMMUNICATIONS, INC.

Principal Place of Business

709 WESTCHESTER AVE
WHITE PLAINS NY 10604

Mailing Address

709 WESTCHESTER AVE
WHITE PLAINS NY 10604

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/12/1996

4. FEI Number

13-3240080

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 retreating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CEO
NAME BRESNAN, WILLIAM J
STREET ADDRESS 709 WESTCHESTER AVE
CITY-ST-ZIP WHITE PLAINS NY 10604 ☐ DELETE

TITLE PS
NAME BRESNAN, WILLIAM J
STREET ADDRESS 709 WESTCHESTER AVE
CITY-ST-ZIP WHITE PLAINS NY 10604 ☐ DELETE

TITLE VST
NAME DEMOND, JEFFREY S
STREET ADDRESS 709 WESTCHESTER AVE
CITY-ST-ZIP WHITE PLAINS NY 10604 ☐ DELETE

TITLE CFO
NAME DEMOND, JEFFREY S
STREET ADDRESS 709 WESTCHESTER AVE
CITY-ST-ZIP WHITE PLAINS NY 10604 ☐ DELETE

TITLE V
NAME BRESNAN, MICHAEL W
STREET ADDRESS 709 WESTCHESTER AVE
CITY-ST-ZIP WHITE PLAINS NY 10604 ☐ DELETE

TITLE V
NAME BRESNAN, DANIEL J
STREET ADDRESS 709 WESTCHESTER AVE
CITY-ST-ZIP WHITE PLAINS NY 10604 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice President + Controller ☐ Change ☒ Addition
1.2 NAME Andrew C. Kober
1.3 STREET ADDRESS 709 Westchester Ave.
1.4 CITY-ST-ZIP White Plains, NY 10604

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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

[Signature]

[Signature]

[Signature]

CR2E034 (10/97)