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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name F96000003793 (4)

COX INTERACTIVE MEDIA, INC.

ATLANTA GA 30319

ATLANTA GA 30318

JACOBSON, RICHARD J

1400 LAKE HEARN DR NE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Principal Place of Business Mailing Address 1400 LAKE HEARN DR NE 1400 LAKE HEARN DR NE ATLANTA GA 30319 ATLANTA GA 30318 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-2251214 Not Applicable Suite Apt. #. etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Z_{10} B. This corporation owes or has paid the current year Intangible Yes □Ño Personal Property Tax due June 30. 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 GOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 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 hance of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME **EASTERLY, DAVID E** 1.2 NAME 1400 LAKE HEARN DR NE STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA 30319 1.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2 1 TITLE NAME KILLEN JR, WILLIAM L 2.2 NAME 1400 LAKE HEARN DR STREET ADDRESS 2 3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 2. 4 CITY - \$1-7IP DELETE Change Addition TITLE 3.1 TITLE WINTER, PETER M 3.2 NAME NAME 1400 LAKE HEARN DR NE STREET ADDRESS 3.3 STREET ADDRESS ATLANTA GA 30319 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE BARNETT, PRESTON B NAME 4. 2 NAME 1400 LAKE HEARN DR NE STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30319 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME MERDEK, ANDREW A 5.2 NAME 1400 LAKE HEARN DR NE STREET ADDRESS 5.3 STREET ADDRESS

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, of an an attachment with an address.

6.4 CHY-ST-7IP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6 1 1171 F

6.2 NAME

DELETE

Change

■ Addition

FILED

Apr 20 1998 8:00am

Secretary of State