

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

DOCUMENT # F97000001477

1. Corporation Name

COMCAST INTERNET ACCESS SERVICES, INC.

Principal Place of Business

% COMCAST CORP  
1500 MARKET ST  
PHILADELPHIA PA 19102

Mailing Address

% COMCAST CORP  
1500 MARKET ST  
PHILADELPHIA PA 19102

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/21/1997

4. FEI Number

APPLIED FOR 52-2014376

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

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New 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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC  
NAME ROBERTS, RALPH J  
STREET ADDRESS 1500 MARKET ST  
CITY-ST-ZIP PHILADELPHIA PA 19102

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DC  
NAME BRODSKY, JULIAN A  
STREET ADDRESS 1500 MARKET ST  
CITY-ST-ZIP PHILADELPHIA PA 19102

☐ DELETE

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

☐ Change ☐ Addition

TITLE DP  
NAME ROBERTS, BRIAN L  
STREET ADDRESS 1500 MARKET ST  
CITY-ST-ZIP PHILADELPHIA PA 19102

☒ DELETE

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

P  
Stephen B. Burke  
1500 Market Street  
Philadelphia, PA 19102

☒ Change ☐ Addition

TITLE DS  
NAME WANG, STANLEY  
STREET ADDRESS 1500 MARKET ST  
CITY-ST-ZIP PHILADELPHIA PA 19102

☐ DELETE

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

☐ Change ☐ Addition

TITLE V  
NAME BLOCK, ARTHUR R  
STREET ADDRESS 1500 MARKET ST  
CITY-ST-ZIP PHILADELPHIA PA 19102

☒ DELETE

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

V  
C. Stephen Backstrom  
1500 Market Street  
Philadelphia, PA 19102

☒ Change ☐ Addition

TITLE T  
NAME ALCHIN, JOHN R  
STREET ADDRESS 1500 MARKET ST  
CITY-ST-ZIP PHILADELPHIA PA 19102

☐ DELETE

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

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen Backstrom

Date

2/25/99

Daytime Phone #

215-981-7557

CR2E034 (1/98)