2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001757

Entity Name: DIGITAL CITY, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 22000 AOL WAY **DULLES, VA 20166** US **Current Mailing Address: New Mailing Address:** 22000 AOL WAY DULLES, VA 20166 US FEI Number: 54-1804465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SWAD, STEPHEN M Name: Name: 22000 AOL WAY Address: Address: City-St-Zip: DULLES, VA 20166 City-St-Zip: Title: Title: () Delete () Change () Addition WYCHULIS, KATHERINE E Name: Name: 22000 AOL WAY Address: Address: City-St-Zip: DULLES, VA 20166 City-St-Zip: **VPSD** Title: Title: () Delete () Change () Addition BOE, RANDALL J Name: Name: 22000 AOL WAY Address: Address: City-St-Zip: DULLES, VA 20166 City-St-Zip: Title: () Delete Title: () Change () Addition LU, CURTIS Name: Name: Address: 22000 AOL WAY Address: City-St-Zip: **DULLES, VA 20166** City-St-Zip: Title: VPC Title: () Delete () Change () Addition COLAN, THOMAS R Name: Name: 22000 AOL WAY Address: Address: City-St-Zip: DULLES, VA 20166 City-St-Zip: Title: **VPAT** () Delete Title: **VPAT** (X) Change () Addition KAMBOUR, ANNALIESE S Name: Name: KAMBOUR, ANNALIESE S ONE TIME WARNER CENTER Address: 75 ROCKEFELLER PLAZA Address: City-St-Zip: NEW YORK, NY 10019 City-St-Zip: NEW YORK, NY 10019

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE E. WYCHULIS AS 04/30/2004

MICHAEL BARTSCHERER, VP - FACILITIES 22110 PACIFIC BOULEVARD DULLES, VA 20166

DIANE ROHLEDER, VP - TAX 22000 AOL WAY DULLES, VA 20166