

2004 FOR PROFIT CORPORATION ANNUAL REPORT

PS 1581

FILED

04 FEB 20 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01222004 Chg-P CR2E034 (10/03)

DOCUMENT # F97000002515					
1. Entity Name ADELPHIA TELECOMMUNICATIONS, INC.					
Principal Place of Business ONE NORTH MAIN ST. COUDERSPORT, PA 16915			Mailing Address ONE NORTH MAIN ST. COUDERSPORT, PA 16915		
2. Principal Place of Business 5619 DTC Parkway Suite, Apt. #, etc. Suite 800		3. Mailing Address Same Suite, Apt. #, etc.			
City & State Greenwood Village, CO		City & State		4. FEI Number 25-1759343	
Zip 80111	Country USA	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324-2525			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COOPER, RON 1 NORTH MAIN STREET COUDERSPORT, PA 16915	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE EXHIBIT A ATTACHED HERETO FOR LIST OF OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP SONNENBERG, BRAD ONE NORTH MAIN ST. COUDERSPORT, PA 16915	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT MORRIS, CHRISTINE ONE NORTH MAIN ST. COUDERSPORT, PA 16915	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SCHLEYER, WILLIAM ONE NORTH MAIN ST. COUDERSPORT, PA 16915	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 100029143631	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS ARIAS, MARIA ONE NORTH MAIN ST. COUDERSPORT, PA 16915	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT MACDONALD, SCOTT ONE NORTH MAIN ST. COUDERSPORT, PA 16915	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Kathy L. Waterman</u>			2/12/04 (303) 268-6300		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

Kathy L. Waterman, Assistant Secretary

Ta

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EXHIBIT A
OFFICERS AND DIRECTORS

<u>Name</u>	<u>Title</u>	<u>Address</u>
William T. Schleyer	Chief Executive Officer and Director	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Ron Cooper	President and Director	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Brad Sonnenberg	Executive Vice President, General Counsel and Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Vanessa Wittman	Executive Vice President, Chief Financial Officer, Treasurer and Director	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
James Zerefos	Vice President and Assistant Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Patty Conroy	Assistant Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111
Kathy L. Waterman	Assistant Secretary	5619 DTC Parkway, Suite 800 Greenwood Village, CO 80111



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032
REFERENCE : 450396 7389086
AUTHORIZATION : *Patricia Pigato*
COST LIMIT : \$ 150.00

ORDER DATE : February 19, 2004
ORDER TIME : 11:25 AM
ORDER NO. : 450396-010
CUSTOMER NO: 7389086
CUSTOMER: Kathy L. Waterman
Adelphia Communications
Suite 800
5619 Dtc Parkway
Greenwood Villa, CO 80111

ANNUAL REPORT FILING

NAME: ADELPHIA TELECOMMUNICATIONS,
INC.

RECEIVED
04 FEB 20 PM 1:05
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: _____