2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 19, 2002 8:00 am Secretary of State DOCUMENT # F97000002517 1. Entity Name ADELPHIA TELECOMMUNICATIONS OF FLORIDA, INC. 02-19-2002 90123 040 ***150.00 Principal Place of Business Mailing Address 1 NORTH MAIN STREET 1 NORTH MAIN STREET **COUDERSPORT PA 16915 COUDERSPORT PA 16915** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 25-1798054 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (9/01) ☐ Change ☐ Addition TITLE TITLE ☐ Delete RIGAS, JOHN J NAME NAME 1 NORTH MAIN STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIE **COUDERSPORT PA 16915** CITY-ST-ZIP ☐ Change Addition TITLE D۷ ☐ Delete TITLE NAME RIGAS, MICHAEL J NAME STREET ADDRESS STREET ADDRESS 1 NORTH MAIN STREET CITY-ST-ZIP **COUDERSPORT PA 16915** CITY-ST-ZIP TITLE DV ☐ Delete TITLE ☐ Change ☐ Addition RIGAS, JAMES P NAME STREET ADDRESS 1 NORTH MAIN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **COUDERSPORT PA 16915** ☐ Delete ☐ Change ☐ Addition NAME RIGAS, TIMOTHY J STREET ADDRESS 1 NORTH MAIN STREET STREET ADDRESS CITY-ST-7IP **COUDERSPORT PA 16915** CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE NAME GLICKAMSN, JOHN B NAME STREET ADDRESS STREET ADDRESS 1 NORTH MAIN STREET CITY-ST-ZIP CITY-ST-7IP **COUDERSPORT PA 16915** Change TITLE ☐ Delete TITLE Addition NAME FISHER, RANDALL D NAME STREET ADDRESS STREET ADDRESS 1 NORTH MAIN STREET CITY-ST-ZIP **COUDERSPORT PA 16915** CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other the empowered.

FILED

AHachment

Adelphia

319700 FF F9700002517

January 29, 2002

VIA OVERNIGHT

Department of State **Division of Corporations** PO Box 1500 Tallahassee, FL 32302-1500

RE: 2002 Uniform Business Report / Adelphia Telecommunications of Florida, Inc.

Dear Sir or Madam:

Enclosed in duplicate for filing, please find the completed 2002 Uniform Business Report for Adelphia Telecommunications of Florida, Inc. Please date stamp the enclosed extra copy of the report and return it in the self-addressed, stamped envelope provided so that we may update our records.

Also enclosed please find a check in the amount of \$150.00, payable to the Department of State, to cover the filing fee.

If you have any questions, please do not hesitate to contact the undersigned.

Sincerely,

Melody A. Heller Legal Assistant

mah Enclosures

James Rigas cc:

Adelphia

First Union National Bank of Florida Pensacola, FL 32534

No. 1119657

1 NORTH MAIN STREET COUDERSPORT, PA 16915

PAY One Hundred Fifty & no/100 Dollars

HF97000002517

319700

63-1012/632

\$******150.00

Check No. 1119657

TO THE ORDER OF DEPARTMENT OF STATE DIVISION OF CORPORATIONS PO BOX 1500 TALLAHASSEE FL 32302-1500

John Riger

#01119657# G063210125G2079940000351#

Adelphia

DETACH ALONG THIS PERFORATION

Vendor No. AP-000-118150 - DEPARTMENT OF STATE

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2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam	MENT # F9700 THE TELECOMMUNICATIONS	00002517 OF FLORIDA, INC.	319700						
Principal Place of Business- 1 NORTH MAIN STREET COUDERSPORT PA 16915 US		Mailing Address 1 NORTH MAIN STREET COUDERSPORT PA 16915 US							
2. Principal P	Place of Business	3. Mailing Address	-	T KODIKOD ILIO IERIK IEDIK EDIKI EDIKI EDIKI DOKIL	00:10 11 301 [:10] 1				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE				
City & Stat		City & State		4. FEI Number 25-1798054	Not	olied For Applicable			
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Addition Fee Required				
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered	Agent		-		
1201 HAY	ATION SERVICE COMPANY YS STREET SSEE FL 32301-2525			s (P.O. Box Number is Not Acceptable)					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	000012020		City		Zip Code				
Tax filing i	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back) OFFICERS AND	After May 1, 200 Make Check Payabl	FEE IS \$150.00 2 Fee will be \$550.00 to Department of S		Added	May Be to Fees]] _		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS FISHER, RANDALL D 1 NORTH MAIN STREET COUDERSPORT PA 16915	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition			
 I hereby of indicated of the corchanged. 	certify that the information supplied with ton this report or supplemental report- rporation or the receiver or trustee emp , or on an attachment with an address.	n this filing does not qualify for s true and accurate and that m owered to execute this report a with all other like empowered.	the exemption stated in by signature shall have the as required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further ce the same legal effect as if made under oath; that I 007, Florida Statutes; and that my name appears	rtify that the inf am an officer o in Block 11 or l	ormation or director Block 12 if			

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8142745830

Adelphia

F990000251

January 29, 2002

VIA OVERNIGHT

Department of State **Division of Corporations** PO Box 1500 Tallahassee, FL 32302-1500

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If you have any questions, please do not hesitate to contact the undersigned.

814-274-9830

814-274-9863 Internet www.adelphia.net

Phone

Fax

Sincerely,

Melody A. Heller Legal Assistant

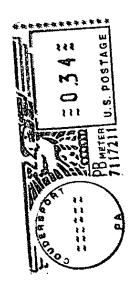
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Enclosures

cc:

James Rigas



Adelphia Buisness Solutions Melody Heller One North Main Street Coudersport, PA 16915

1 North Main Street Coudersport PA 16915

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