

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

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Feb 01, 1999 8:00am  
Secretary of State

02-01-1999 90049 027 \*\*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F97000003401

1. Corporation Name  
GRTV, INC.

Principal Place of Business  
400 S. EL CAMINO REAL. #1100  
SAN MATEO CA 94402-1708

Mailing Address  
400 S. EL CAMINO REAL. #1100  
SAN MATEO CA 94402-1708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1997

4. FEI Number

94-3274718

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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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 CCEO ☐ DELETE

NAME BATINOVICH, ROBERT  
STREET ADDRESS 441 ROEHAMPTON RD.  
CITY-ST-ZIP HILLSBOROUGH CA 94010

1.1 TITLE

94-3274718

☐ Change ☐ Addition

TITLE PCOO ☐ DELETE

NAME BATINOVICH, ANDREW  
STREET ADDRESS 1201 MARLBOROUGH RD.  
CITY-ST-ZIP HILLSBOROUGH CA 94010-1708

2.1 TITLE

☐ Change ☐ Addition

TITLE EVP ☐ DELETE

NAME BOYLE, SANDRA L  
STREET ADDRESS 431 HURLINGHAM  
CITY-ST-ZIP SAN MATEO CA 94402

3.1 TITLE

☐ Change ☐ Addition

TITLE SVPT ☐ DELETE

NAME GARNICK, TERRI  
STREET ADDRESS 421 PARROTT  
CITY-ST-ZIP SAN MATEO CA 94402

4.1 TITLE

☐ Change ☐ Addition

TITLE SVPS ☐ DELETE

NAME AUSTIN, FRANK E  
STREET ADDRESS 180 E. CREEK DR.  
CITY-ST-ZIP MENLO PARK CA 94025

5.1 TITLE

☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME CHENG, ANNA  
STREET ADDRESS 1621 ELM ST.  
CITY-ST-ZIP SAN CARLOS CA 94070

6.1 TITLE

☐ 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 or 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

1/13/99

(650) 343-9300

Date

Daytime Phone #

CR2E034 (11/98)