

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003759

1. Entity Name

CHANNEL 34 TELEVISION STATION, INC.

FILED

May 04, 2001 8:00 am  
Secretary of State

05-04-2001 90126 013 \*\*\*150.00

Principal Place of Business

630 FIFTH AVE  
27TH FLR  
NEW YORK NY 10111

Mailing Address

630 FIFTH AVE  
27TH FLR  
NEW YORK NY 10111

UUU47588



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

C/O WVNY P.O. Box 22

BURLINGTON, VT

05401

4. FEI Number 65-0768333

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME KARLIK, EDWARD  
STREET ADDRESS 641 STEAMBOAT ROAD  
CITY-ST-ZIP GREENWICH CT 06830

TITLE DV ☐ Delete  
NAME LANGMAN, M S  
STREET ADDRESS 1330 AVENUE OF THE AMERICAS, FIFTH FLOOR  
CITY-ST-ZIP NEW YORK NY 10019

TITLE ASD ☒ Delete  
NAME RAMSAY, DAVID R  
STREET ADDRESS 1330 AVENUE OF THE AMERICAS, FIFTH FLOOR  
CITY-ST-ZIP NEW YORK NY 10019

TITLE ATD ☐ Delete  
NAME HERMAN, M B  
STREET ADDRESS 1330 AVENUE OF THE AMERICAS, FIFTH FLOOR  
CITY-ST-ZIP NEW YORK NY 10019

TITLE AS ☐ Delete  
NAME COOPER, NANCY  
STREET ADDRESS 630 FIFTH AVE  
CITY-ST-ZIP NEW YORK NY 10111

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE CFO ☐ Change ☒ Addition  
NAME ETHAN BOND  
STREET ADDRESS L-8 STONEHEDGE DR  
CITY-ST-ZIP SO. BURLINGTON, VT 05403

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 like empowered.

SIGNATURE: Ethan Bond ETHAN BOND, CFO 4/27/01 802-860-2222  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)