

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

FILED
Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000003894 (9)**

1. Corporation Name
TIME WARNER INC.

Principal Place of Business
**75 ROCKEFELLER PLAZA
NEW YORK NY 10019**

Mailing Address
**75 ROCKEFELLER PLAZA
NEW YORK NY 10019**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/24/1997	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 13-3527249	Applied For <input type="checkbox"/> Not Applicable
23. Zip	25. Country	29. Zip	30. Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. City	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 date, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEOD	1.1 TITLE	VICE CHAIRMAN
NAME	LEVIN, GERALD M	1.2 NAME	TURNER, R.E.
STREET ADDRESS	75 ROCKEFELLER PLAZA	1.3 STREET ADDRESS	75 ROCKEFELLER PLAZA
CITY-ST-ZIP	NEW YORK NY 10019	1.4 CITY-ST-ZIP	NEW YORK, NY 10019
TITLE	PD	2.1 TITLE	SR VICE PRESIDENT
NAME	PARSONS, RICHARD D	2.2 NAME	TIMOTHY A. BOGGS
STREET ADDRESS	75 ROCKEFELLER PLAZA	2.3 STREET ADDRESS	800 CONNECTICUT AVENUE, NW
CITY-ST-ZIP	NEW YORK NY 10019	2.4 CITY-ST-ZIP	WASHINGTON, DC 20006
TITLE	EVGC	3.1 TITLE	
NAME	HAJE, PETER R	3.2 NAME	
STREET ADDRESS	75 ROCKEFELLER PLAZA	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	3.4 CITY-ST-ZIP	
TITLE	VCFD	4.1 TITLE	
NAME	BRESSLER, RICHARD J	4.2 NAME	
STREET ADDRESS	75 ROCKEFELLER PLAZA	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	4.4 CITY-ST-ZIP	
TITLE	VC	5.1 TITLE	
NAME	LABARCA, JOHN A	5.2 NAME	
STREET ADDRESS	75 ROCKEFELLER PLAZA	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	LOCHNER, PHILIP R JR	6.2 NAME	
STREET ADDRESS	75 ROCKEFELLER PLAZA	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	6.4 CITY-ST-ZIP	

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 if changed, or on an attachment with an address.

SIGNATURE: *Susan A. Waxenberg* SUSAN A. WAXENBERG

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CR2E034 (10/97)