5-6-98 B 652 2 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F97000004850 (0) DOCUMENT #

here. I Character 1 ...

HERITAGE MEDIA CORPORATION

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



	Of 200micou	maning macroso					
1300 NORTH MARKET STREET. STE 404 WILMINGTON DE 19801		1300 NORTH MARKET STREET. STE 404 WILMINGTON DE 19801		DO NOT INDITE IN	T. 110 004 05		
					DO NOT WRITE IN.	THIS SPACE	
					3. Date Incorporated or Qualified		
A B-1-1-161		TAC NOTES AND ADDRESS.			09/17/1997		
2. Principal Pla	C6 Of Business	2a. Mailing Address			4. FEI Number	} 	plied For
21		[26]			42-1299303		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	9 8.75 /	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution			
Zip	Country 2 ip		Countr	Country 8. This corporation owes of		he current year Int	angible
24	25 29 30		30	Personal Property Tax due June 30. Yes No			
	9. Name and Address of Current	Registered Agent		,	10. Name and Address of New Regist	lered Agent	
COR	IPORATION SERVICE COMPANY		81	Name			
1201 HAYS STREET			82	Street	Address (P.O. Box Number is Not Acceptable)		
IALI	AHASSEE FL 32301-2525		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							
S	ignature, typed or punted harne of registere Laguni		II Hogistered Ag	ent signature		JATE	
12.	OFFICERS AND	· · - · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	C	L_] DELETE	1.1 TITLE		AS/AT		Addition
NAME MURDOCH, K.R.			1.2 NAME		LESLEY R. COHEN		[
STREET ADDRESS 10201 WEST PICO BLVD			1.3 STREE	1.3 STREET ADDRESS 1300 N. Market Street, Suite 404			
CITY-ST-ZIP	LOS ANGELES CA		1.4 CITY -	ST-ZIP	Wilmington, DE 19801		
TITLE	VS	DELETE	2.1 TITL€			☐ Change	☐ Addition
NAME	CONSTANTINE, JAN F						
STREET ADDRESS 1211 AVENUE OF THE AMERICAS			2.3 S1REE	1 ADDRESS			
CITY-ST-ZIP	NEW YORK NY		2. 4 CHY	ST-ZIP			
TITLE	VO	DELETE	3.1 TITLE			Change	☐ Addition
NAME	DEVOE, DAVIO F						
STREET ADDRESS 1211 AVENUE OF THE AMERICAS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP	NEW YORK NY		3.4. CITY	ST-ZIP			
TITLE	Vo	DELETE	4.1 TITLE			☐ Change	Addition
NAME	SISKIND, ARTHUR M		4. 2 NAME				
STREET ADDRESS	1211 AVENUE OF THE AMERIC	CAS	4.3 STREE	T ADDRESS			-
CITY-ST-ZIP	NEW YORK NY		4.4 CITY-	ST-ZIP			-
TITLE	P	☐ DELFTÉ	5.1 TITLE			Change	Addition
NAME	PORCO, DOMINIC		5.2 NAME				1
STREET ADDRESS	1211 AVENUE OF THE AMERK	CAS	5.3 STREE	1 ADDRESS			
CITY-ST-ZIP	NEW YORK NY	: :	5.4 CITY-				
TITLE	V	DELETE	61 TITLE	- EI		Change	Addition
NAME	DUGGAN, WILLIAM		6.2 NAME		·		_
STREET ADDRESS	1211 AVENUE OF THE AMERIC	CAS		1 AUDRESS			
	NEW YORK NY	VOV					j
CITY-ST-ZIP	(11-17 V(11) 11		64 CITY-	31-71P	<u> </u>		

14. Thereby 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 affactment with an address.