

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90150 042 ***150.00

0613/59 AI

DOCUMENT # F98000002789

1. Entity Name
LIBERTY MULTICOUNTRY DTH, INC.

Principal Place of Business 9197 S PEORIA ST ATTN: LIBERTY TAX DEPT ENGLEWOOD CO 80112 US	Mailing Address P O BOX 5630 ATTN: LIBERTY TAX DEPT DENVER CO 80217 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 12300 Liberty Blvd	3. Mailing Address 12300 Liberty Blvd
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State Englewood, CO	City & State Englewood, CO
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4. FEI Number 84-1440960	Applied For <input type="checkbox"/> Not Applicable
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Zip 80112	Country USA	Zip 80112	Country USA	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	D MALONE, JOHN C 9197 S PEORIA ST ENGLEWOOD CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWARD, GARY S 9197 S PEORIA ENGLEWOOD CO 30112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CURTIS, MIRANDA 9197 PEORIA ST ENGLEWOOD CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV HOLLIS, GRAHAM E 9197 S PEORIA ST ENGLEWOOD CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV NOSLER, DAVE 9197 S PEORIA ST ENGLEWOOD CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLAYLOCK, GARY 9197 S PEORIA ST ENGLEWOOD CO 80112	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John C. Malone 12300 Liberty Blvd Englewood, CO 80112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gary S Howard 12300 Liberty Blvd Englewood, CO 80112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Miranda Curtis 12300 Liberty Blvd Englewood, CO 80112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Graham E. Hollis 12300 Liberty Blvd Englewood, CO 80112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Dave Nosler 12300 Liberty Blvd Englewood, CO 81012	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gary Blaylock 12300 Liberty Blvd Englewood, CO 80112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Gary Blaylock* **SIGNATURE REQUIRED** **Gary Blaylock/Vice President** **720-875-5400**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)