

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90200 012 ***150.00

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1. Entity Name
UTV OF ORLANDO, INC.



Principal Place of Business
10201 W. PICO BLVD
LOS ANGELES, CA 90035

Mailing Address
P.O. BOX 900
ATTN: TAX DEPT
BEVERLY HILLS, CA 90212

64010013



DO NOT WRITE IN THIS SPACE

02052004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3580717

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
MITCHELL, STERN
10201 W. PICO BLVD
LOS ANGELES, CA 90035

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
PARRISH, RAYMOND L
10201 W. PICO BLVD
LOS ANGELES, CA 90035

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MILLER, DAVID E
10201 W. PICO BLVD
LOS ANGELES, CA 90035

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MURDOCK, RUPERT
10201 W. PICO BLVD
LOS ANGELES, CA 90035

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____

Raymond L. Parrish

VICE PRESIDENT 4/8/2004 (310) 369-1557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #