

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90353 035 ***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

50040866



02042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3580717	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	MITCHELL, STERN <i>LACHLAN MURDOCH</i>
STREET ADDRESS	10201 W. PICO BLVD
CITY-ST-ZIP	LOS ANGELES, CA 90035
TITLE	VP
NAME	PARRISH, RAYMOND L
STREET ADDRESS	10201 W. PICO BLVD
CITY-ST-ZIP	LOS ANGELES, CA 90035
TITLE	TD
NAME	MILLER, DAVID E
STREET ADDRESS	10201 W. PICO BLVD
CITY-ST-ZIP	LOS ANGELES, CA 90035
TITLE	D
NAME	MURDOCH, RUPERT
STREET ADDRESS	10201 W. PICO BLVD
CITY-ST-ZIP	LOS ANGELES, CA 90035
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAYMOND L. PARRISH

4-4-05 (310) 869-1557
Date Daytime Phone #