FOW: FILING FEE AFTER MAY 1ST IS \$550.00					FILED		
CCRATION ANTREPORT 399		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			00 MAY -3 PM 2:51		
DOCIENT # G61817 1. Corp h Name				UNIONO .	SECRE TALLAH	TARY OF ST ASSEE, FLO	FATE PRIDA
FLORA CABLEVISION MANAGEMENT CORP							T
/290 A	e of Business RBOR DRIVE RD CT 06902	P.O. BOX 665	O TWC TAX DEPT		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
2. Princal	Place of Business	2a. Mailing Address		09/29/1983 4. FEI Number 14-1649213		Applied For	
Suite Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional	
City & Star 23 Zip	Country	City & State 28 Zip Country		6. Election Campaign Financing. Trust Fund Contribution	Added to		
24	25 9. Name and Address of Current	29	_	iu y	This corporation owes the curre Property Tax. Name and Address of New Re	Yes	☐ No
CT CORPORATION 1200 S PINE ISLAND ROAD PLANTATION FL 33324 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Staturegistered office or registered agent, or both, in the State of Florida. Such ch				84 City above-named cas authorized by	v the corporation's board of directors	FL 85 Z	ip Code
as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE							
12.	OFFICERS AND D	RECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 12
NAME		☐DELETE BOGART	1.1 TII 1.2 NA	ME		Char	ORS IN 12 1ge Addition Accordance Accordanc
STREET ADDRESS CITY - ST - ZIP	NEW MORK NW 10010			REET ADORESS TY - ST - ZIP	•)c
TITLE NAME STREET ADDRESS	TLE SV.P. DELETE ME JOSEPH A. RIPP			TLE ME REET ADDRESS		Char	nge Addition
CITY ST ZIP NEW YORK NY 10019 TITLE VP DELETE			3.1 Ti			Char	nge Addition
NAME STREET ADDRESS CITY - ST - ZIP	HAYS, SPENCER B 75 ROCKEFELLER I NEW YORK NY 1001			ME REET ADDRESS TY - ST - ZIP	2000032	:8084 :0001016	
TITLE NAME	VP ALLAMAN, GAIL L	DELETE	4.1 TII	rle	****[5]	J.UU 📑 🖦	ge 1 JU Abbion
STREET ADORESS CITY - ST - ZIP	160 INVERNESS DE ENGLEWOOD CO 801		4.3 ST	REET ADORESS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT KARAS, MARK L 160 INVERNESS DE ENGLEWOOD CO 801					Char	nge Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V P WARREN, CHRISTIE 75 ROCKEFELLER E NEW YORK NY 1001	PLAZA				Char	nge Addition
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, with all other like empowered.							
SIGNAT		ASSIST R PRINTED NAME OF SIGNING		TREASU		(303) 7	99-1200