

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90231 031 ***150.00

DOCUMENT # G90839

1. Entity Name
**CABLEVISION INDUSTRIES OF CENTRAL
FLORIDA, INC.**



Principal Place of Business
**290 HARBOR DR
STAMFORD, CT 06902 US**

Mailing Address
**C/O TWC TAX DEPT.
P. O. BOX 6659
ENGLEWOOD, CO 80155-6659 US**

11034968



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

% JANICE CANNON

Suite, Apt. #, etc.

75 ROCKEFELLER PLAZA

City & State

NEW YORK, NY

Zip

10019

Country

USA

4. FEI Number

14-1656308

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

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. 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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P/D ☒ Delete
NAME BOGART, CHRISTOPHER
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE V/D ☒ Delete
NAME RIPP, JOSEPH A
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE V/D ☒ Delete
NAME HAYS, SPENCER B.
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE V ☐ Delete
NAME ALLAMAN, GAIL L
STREET ADDRESS 160 INVERNESS DR W
CITY-ST-ZIP ENGLEWOOD, CO 80112

TITLE AT ☒ Delete
NAME KARAS, MARK L.
STREET ADDRESS 160 INVERNESS DR W
CITY-ST-ZIP ENGLEWOOD, CO 80112

TITLE V ☒ Delete
NAME RIGSBY, JOHN
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition
NAME CAPPUCCIO, PAUL T.
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE S ☒ Change ☒ Addition
NAME CANNON, JANICE
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE DSVP ☒ Change ☐ Addition
NAME HAYS, SPENCER B.
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☒ Change ☐ Addition
NAME SOLOMON, JAMES M.
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NY 10019

TITLE SVP ☒ Change ☐ Addition
NAME RIGSBY, JOHN
STREET ADDRESS %5TIME WARNER CABLE, 2251 LUCIEN WAY, STE 320
CITY-ST-ZIP MAITLAND, FL 32751

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JANICE CANNON 4/30/03 212-484-6503

Date Daytime Phone #

CR2E034 (10/02)