FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

1500 MARKET ST

ROBERTS, RALPH

1500 MARKET ST

PHILADELPHIA PA 19102

PHILADELPHIA PA 19102



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

COMCAST CABLEVISION CORPORATION OF THE SOUTHEAST

Feb 09 1998 8:00am Secretary of State

	e of Business	Mailing Address			
1401 NORTHPOINT PARKWAY		1500 MARKET ST.			
2ND FLOOR WEST PALM BEACH FL 33407		36TH FLOOR PHILADELPHIA PA 19102-2148		DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
				02/11/1986	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		23-2416328	Not Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
				10. Name and Address of New Registere	d Agent
	T CORPORATION SYSTEM		81 Name		•
12 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		B2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
'	WITH TE COOLT		83		
			84 City		85 Zip Code
office or r agent I a SIGNATURE	registered agent, or both, in the State in familiar with, and accept the obligation familiar with and accept the obligations were strong standard agent.	of Florida, Such change was a tions of, Section 607,0505, Flo	uthorized by the corpor	rporation submits this statement for the purpose ation's board of directors. I hereby accept the appropriate the purpose ation's board of directors. I hereby accept the appropriate the purpose that the purpose the purpose the purpose the purpose the purpose the purpose the pu	oppointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BAXTER, THOMAS G		1.2 NAME		6
STREET ADDRESS	1500 MARKET ST		1.3 STREET ADDRESS		
CITY-ST-ZIF	PHILADELPHIA PA 19102		1.4 CITY-ST-ZIP		
TITLE	PACHETOON C STERNEN	☐ DELETE	2.1 TITLE		Change Addition
NAME DYDEST ADDRESS	BACKSTROM, C. STEPHEN 1500 MARKET ST		2.2 NAME		
STREET ADDRESS	PHILADELPHIA PA 19102		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	V	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	SMITH, LAWRENCE S		3.2 NAME	`	2.7
STREET ADDRESS	1500 MARKET ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19102		3.4. CITY-ST-ZIP		
TITLE	8	☐ DELETE	4.1 TITLE		Change Addition
NAME	WANG, STANLEY		4. 2 NAME		
STREET ADDRESS	1500 MARKET ST		4.3 STREET ADDRESS		;
CITY-ST-ZIP	PHILADELPHIA PA 19102		4.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	5.1 TITLE	·	☐ Change ☐ Addition
NAME	ALCHIN, JOHN		5.2 NAME		

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 suppliemental 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 frusted employered 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

Vice President 215-981-7557

DELETE

Addition