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Mar 10 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K73734

(1)

1. Corporation Name  
HOUSTON VIDEO VENTURE, INC.



Principal Place of Business

200 S ANDREWS AVE  
P. O. BOX 407060  
FT LAUDERDALE FL 33301  
US

Mailing Address

% HOWARD P SILLS  
P. O. BOX 407060  
FT LAUDERDALE FL 33340-7060  
US

3. Date Incorporated or Qualified  
03/17/1989

3a. Date of Last Report  
04/30/1996

2. Principal Place of Business

21 1201 Elm Street

Suite, Apt. #, etc.

22 City & State

23 Dallas, TX

24 75270

25 USA

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 City & State

28

29

30

Country

4. FEI Number

65-0158256

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC  
1201 HAYS STREET  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 500002108735

84 City

\*\*\*330.00

FL Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
FIELDS, BILL  
STREET ADDRESS  
200 S. ANDREWS AVE.  
CITY-ST-ZIP  
FT LAUDERDALE FL 33301

TITLE ☒ DELETE

NAME  
EVP  
HAWKINS, THOMAS W  
STREET ADDRESS  
200 S ANDREWS AVE  
CITY-ST-ZIP  
FT LAUDERDALE FL 33301

TITLE ☒ DELETE

NAME  
P  
BARRETT, H. SCOTT  
STREET ADDRESS  
200 S ANDREWS AVE  
CITY-ST-ZIP  
FT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME  
EVP  
BYRNE, THOMAS C  
STREET ADDRESS  
200 S ANDREWS AVE  
CITY-ST-ZIP  
FT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME  
SVP  
PHILLIPS, JOE  
STREET ADDRESS  
200 S ANDREWS AVE  
CITY-ST-ZIP  
FT LAUDERDALE FL 33301

TITLE ☒ DELETE

NAME  
SVP  
WOODS, BRIAN  
STREET ADDRESS  
200 S ANDREWS AVE  
CITY-ST-ZIP  
FT LAUDERDALE FL 33301

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director + CEO ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
1201 Elm St.  
Dallas, TX 75270

2.1 TITLE Ex. V.P. ☐ Change ☒ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Gary Peterson  
1201 Elm St.  
Dallas, TX 75270

3.1 TITLE Ex. V.P. ☐ Change ☒ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
Adam Phillips  
1201 Elm St.  
Dallas, TX 75270

4.1 TITLE Vice chairman ☒ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
1201 Elm Street  
Dallas, TX 75270

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
1201 Elm Street  
Dallas, TX 75270

6.1 TITLE Ex. V.P. ☐ Change ☒ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
Mark Gilman  
1201 Elm Street  
Dallas, TX 75270

14. I do 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.

SIGNATURE: *Marci Sh...*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/97 954-832-3000  
Date Daytime Phone #

CR2E034 (9/96)