

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000003782 1. Entity Name TCI ADELPHIA HOLDINGS, LLC	
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Principal Place of Business 1500 MARKET STREET PHILADELPHIA, PA 19102	Mailing Address 1500 MARKET STREET PHILADELPHIA, PA 19102
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DO NOT WRITE IN THIS SPACE



04122007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 84-1451914	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TCI EVANGOLA, INC. 1500 MARKET STREET PHILADELPHIA, PA 19102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TCI NEW YORK HOLDINGS, INC. 1201 MARKET STREET, SUITE 1000 WILMINGTON, DE 19801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TCI OHIO HOLDINGS, INC. 1500 MARKET STREET PHILADELPHIA, PA 19102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TCI PENNSYLVANIA HOLDINGS, INC. 1500 MARKET STREET PHILADELPHIA, PA 19102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/10/07-80043-008 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: C.S. Backstrom C. STEPHEN BACKSTROM 4/23/07 215-981-7557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #