

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

FILED

Feb 12 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 # **P04443** (8)

1. Corporation Name
L-R- CABLE, INC.

Principal Place of Business 312 WALNUT ST 28 FL PO BOX 5380 CINCINNATI OH 45201 US	Mailing Address 312 WALNUT ST. 28TH FLOOR P O BOX 5380 CINCINNATI OH 45201-5380 US
----------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------



2. Principal Place of Business 21 1500 MARKET STREET Suite, Apt. #, etc. 22 36TH FLOOR City & State 23 PHILADELPHIA, PA Zip 24 19102-2148	2a. Mailing Address 26 1500 MARKET STREET Suite, Apt. #, etc. 27 36TH FLOOR City & State 28 PHILADELPHIA, PA Zip 29 19102-2148	3. Date Incorporated or Qualified 12/21/1984	3a. Date of Last Report 05/01/1996	4. FEI Number 31-1063219	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees		
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CRAWFORD, F. S 312 WALNUT STREET, 28TH FLOOR CINCINNATI OH <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	P BAXTER, THOMAS G. 1500 MARKET STREET PHILADELPHIA, PA 19102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CASTELLINI, D.J. 312 WALNUT ST, 28TH FLOOR CINCINNATI OH <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	V BACKSTROM, C. STEPHEN 1500 MARKET STREET PHILADELPHIA, PA 19102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WOLFZORN, E. JOHN 312 WALNUT STREET, 28TH FLOOR CINCINNATI OH <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	V SMITH, LAWRENCE S. 1500 MARKET STREET PHILADELPHIA, PA 19102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCRIPPS, CHARLES E. 312 WALNUT STREET, 28TH FLOOR CINCINNATI OH <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	S WANG, STANLEY 1500 MARKET STREET PHILADELPHIA, PA 19102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KUPRIONIS, M. DENISE 312 WALNUT STREET, 28TH FLOOR CINCINNATI OH <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	T ALCHIN, JOHN 1500 MARKET STREET PHILADELPHIA, PA 19102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LESER, L. A 315 WALNUT ST 38 FL CINCINNATI OH <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	D ROBERTS, RALPH 1500 MARKET STREET PHILADELPHIA, PA 19102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: C. Stephen Backstrom **C. STEPHEN BACKSTROM** 1/20/97 (215) 981-7557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)