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Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # **P04467** **(7)**

1. Corporation Name
~~EWS CABLE, INC.~~
COMCAST CABLEVISION OF THE SOUTH, INC.
(formerly: EWS CABLE, INC.)

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

3. Date Incorporated or Qualified: 12/26/1984
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 1500 MARKET STREET
Suite, Apt. #, etc.
22 36TH FLOOR
City & State
23 PHILADELPHIA, PA
Zip 24 19102-2148 Country 25 USA

2a. Mailing Address
26 1500 MARKET STREET
Suite, Apt. #, etc.
27 36TH FLOOR
City & State
28 PHILADELPHIA, PA
Zip 29 19102-2148 Country 30 USA

4. FEI Number: 31-1063218 ☐ 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

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

500002087485
-02/14/97--01015--004
***165.00

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

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

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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 1/30/97 (215) 981-7557