FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P09839** **(2)**

1. Corporation Name

WARNER CABLE COMMUNICATIONS INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
75 ROCKEFELLER PLAZA C/O MARIE WHITE 25TH FLR NEW YORK NY 10019	75 ROCKEFELLER PLAZA C/O MARIE WHITE 25TH FLR NEW YORK NY 10019

3. Date Incorporated or Qualified: 04/21/1986
3a. Date of Last Report: 07/25/1994

2. Principal Place of Business
21 75 Rockefeller Plaza
Suite, Apt. #, etc.
22 c/o Marie N. White
City & State
23 New York, NY
Zip 24 10019 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 13-3134949 ☐ 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

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	LEVIN, GERALD M.	12 NAME		
STREET ADDRESS	75 ROCKEFELLER PLAZA	13 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY	14 CITY-ST-ZIP		
TITLE	VD	21 TITLE		☐ Change ☐ Addition
NAME	HAJE, PETER R	22 NAME		
STREET ADDRESS	75 ROCKEFELLER PLZ	23 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10019	24 CITY-ST-ZIP		
TITLE	~~SV~~	31 TITLE	V	☒ Change ☐ Addition
NAME	WASSERMAN, BERT W.	32 NAME	Hays, Spencer B.	
STREET ADDRESS	75 ROCKEFELLER PLACE	33 STREET ADDRESS	75 Rockefeller Plaza	
CITY-ST-ZIP	NEW YORK NY	34 CITY-ST-ZIP	New York, NY 10019	
TITLE	V	41 TITLE		☐ Change ☐ Addition
NAME	PETTY, RICHARD M.	42 NAME		
STREET ADDRESS	300 FIRST STAMFORD PLACE	43 STREET ADDRESS		
CITY-ST-ZIP	STAMFORD CT 06902	44 CITY-ST-ZIP		
TITLE	Asst. Sec.	51 TITLE		☒ Change ☐ Addition
NAME	WHITE, MARIE	52 NAME		
STREET ADDRESS	75 ROCKEFELLER PLZ	53 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY	54 CITY-ST-ZIP		
TITLE	~~VT~~	61 TITLE	T	☒ Change ☐ Addition
NAME	DAVIES, RICHARD	62 NAME	Armour, Donald	
STREET ADDRESS	300 FIRST STAMFORD PLZ	63 STREET ADDRESS	300 1st Stamford Pl	
CITY-ST-ZIP	STAMFORD CT 06902	64 CITY-ST-ZIP	Stamford CT 06902	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Marie N. White **Marie N. White, Asst. Sec.** 4/25/95 **(212) 484-7596**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Title) (Daytime Phone #)

0096090 FP