**FILED** 

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90017 033 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # P12099**

1. Corporation Name

**ADELPHIA COMMUNICATIONS CORPORATION** 

					-	i idailda car erbia ciari parea incentraria sacc		i Bigit	81811 6	TAN AIRT FEEL	
Principal Place of Business Mailing Address											
MAIN AT WATER ST MAIN AT WATER ST											
COUDERSPORT	PA 16915	COUDERSPORT PA 16915 US	COUDERSPORT PA 16915			DO NOT WRITE IN THIS SPACE					
US		US .				3.	Date incorporated or Qualifed 11/12/1986		ے۔۔۔۔		
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			$\neg \top$	Ap	plied For
21		26	26			23-2417713				No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				_	Certificate of Status Desired				Additional
22		27				3.	Certificate of Status Desired		F	ee Re	quired
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be					
23		28					Trust Fund Contribution		Ac	ided t	to Fees
Zíp				intry		8. This corporation owes the current year Intangible				<b>17</b> 1.	
24	25	29	30				Personal Property Tax.		_] Yes	<del></del>	<b>∑</b> No
	9. Name and Address of Curr	rent Registered Agent		24	Name	10.	Name and Address of New Registere	d Aç	jent	—	
THE	PRENTICE-HALL CORPORATI	ION SYSTEM INC		81	Name						
1201 HAYS STREET			82	Street Addre	ddress (P.O. Box Number is Not Acceptable)						
SUITE 105				83	ļ <u>.</u>						
	AHASSEE FL 32301			63							
Incl	ATTAGOEE TE GEGOT			84	City				85	Zip (	Code
					L		<u> </u>	<u>L</u>	بلا	na ite	rogistored
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change was	authorized	יס נ	the corporatio	oration on's bo	n submits this statement for the purpose oard of directors. I hereby accept the app	ointr	nent	as re	gistered
SIGNATURE											
	Signature, typed or printed name of registered			Ager	nt signature required		reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	A NID	nie	ECTO	DS IN 12
12.	D	AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS		□ Ch		☐ Addition
TITLE	PATTERSON, PERRY	- OCCEPTE	1.2 N/						_	Ĭ	
NAME	E. 2ND ST.				T ADDRESS						
STREET ADDRESS	COUDERSPORT PA				T-ZIP						
CITY-ST-ZIP	VPAS	☐ DELETE	2.1 Ti	_	1-217		***************************************		Ch	ange	☐ Addition
TITLE	FISHER, RANDALL D	- Deterie	2.1 N						_	•	_
NAME	MAIN AT WATER ST				T ADDRESS						
STREET ADDRESS	COUDERSPORT PA 16915				]						
Criy-ST-ZIP	VID	☐ DELETE	2.4 C		ST-ZIP					nange	Addition
TITLE	RIGAS, TIMOTHY J.		3.2 N/						_	·	<del></del>
NAME	MAIN AT WATER ST				TADDRESS						
STREET ADDRESS	COUDERSPORT PA 16915										
CITY-ST-ZIP	VD	DELETE	3.4. C		ST-ZIP				Ch	nange	Addition
TITLE	RIGAS, MICHAEL J.		1						_		_
NAME	MAIN AT WATER ST		4.2 N								
STREET ADDRESS	COUDERSPORT PA 16915		•		TADDRESS						
CITY-ST-ZIP	VD	DELETE	4.4 CI 5.1 TI	_	T-ZIP		<u></u>		□1 Ch	nange	Addition
TITLE	l 17	Ú pereie	5.1 II 5.2 N							ia.igo	
NAME	RIGAS, JAMES P.				TADDRESS						
STREET ADDRESS	MAIN AT WATER ST				1						
CITY-ST-ZIP	COUDERSPORT PA 16915	DELETE	5.4 CI 6.1 TI		T-ZIP			—		nance	Addition
TITLE		[ ] DECE IE	62 N							Lings	
NAME	METROS, PETE J.	E			T ADDRESS						

14. I 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 receiveryor 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 attachnier with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

**GRAN RAPIDS MI** 

Randall D. Fisher

(814) 274-9830

Daytime Phone #