

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P24159

1. Entity Name

WORLD CHAMPIONSHIP WRESTLING, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90227 041 ***150.00

Principal Place of Business

Mailing Address

ONE CNN CENTER
BOX 105366
ATLANTA GA 30348-5366

C/O MARIE WHITE
75 ROCKEFELLER PLAZA 25TH FL
NEW YORK NY 10019-6908
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-1811414

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME SCHILLER, HARVEY W
STREET ADDRESS ONE CNN CENTER
CITY-ST-ZIP ATLANTA GA 30348-5366

TITLE P ☒ Change ☐ Addition
NAME ERIC BISCHOFF
STREET ADDRESS ONE CNN CENTER
CITY-ST-ZIP ATLANTA, GA 30348

TITLE DVPT ☐ Delete
NAME PACE, WAYNE H
STREET ADDRESS ONE CNN CENTER
CITY-ST-ZIP ATLANTA GA 30348-5366

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVPS ☐ Delete
NAME VELCOFF, ANDREW J
STREET ADDRESS ONE CNN CENTER
CITY-ST-ZIP ATLANTA GA 30348-5366

TITLE D/VP/S ☒ Change ☐ Addition
NAME VELCOFF, ANDREW J.
STREET ADDRESS 1050 TECHWOOD DRIVE
CITY-ST-ZIP ATLANTA, GA 30318

TITLE VP ☐ Delete
NAME CHRISTIE, WARREN A
STREET ADDRESS 1271 AVENUE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY 10020

TITLE VP ☒ Change ☐ Addition
NAME CHRISTIE, WARREN A.
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK, NEW YORK 10019

TITLE VP ☐ Delete
NAME HAYS, SPENCER B
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK NY 10019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME WHITE, MARIE N
STREET ADDRESS 75 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK NY 10019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marie N White*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/04/00

212.484.7716

Date

Daytime Phone #

CR2E034 (9/99)