

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P36434

(9)

1. Corporation Name

NBC NEWS CHANNEL, INC.

FILED

1995 JUL 25 AM 9:18

NEW YORK STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**30 ROCKEFELLER CENTER
NEW YORK NY 10112**

**30 ROCKEFELLER CENTER
NEW YORK NY 10112**

DO NOT WRITE IN THIS SPACE

**915 WOODRIDGE CENTER DR.
CHARLOTTE, N.C.**

3. Date Incorporated or Qualified

11/25/1991

3a. Date of Last Report

02/08/1994

4. FEI Number

13-3259401

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

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 30 Rockefeller Plaza

22 City & State

27 Attn: Tax Department

23 Zip

25 Country

28 Zip

30 Country

24

25

28

10112

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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

(Signature of Registered Agent or person authorized to accept appointment)

(Signature of Agent Signature Required when Incorporating)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	HORNER, ROBERT
STREET ADDRESS	30 ROCKEFELLER CENTER
CITY ST ZIP	NEW YORK NY
TITLE	VD
NAME	GREINER, JAMES
STREET ADDRESS	30 ROCKEFELLER CENTER
CITY ST ZIP	NEW YORK NY
TITLE	S
NAME	STANDER, STEPHEN
STREET ADDRESS	30 ROCKEFELLER CENTER
CITY ST ZIP	NEW YORK NY
TITLE	AT
NAME	ANGSTREICH, ARTHUR
STREET ADDRESS	30 ROCKEFELLER CTR
CITY ST ZIP	NEW YORK NY
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	915 WOODRIDGE CENTER DR.
1.4 CITY ST ZIP	CHARLOTTE, N.C.
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	T JENSEN, WARREN
5.3 STREET ADDRESS	30 ROCKEFELLER PLAZA
5.4 CITY ST ZIP	NEW YORK, N.Y. 10112
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	BLACK, ANDREW
6.3 STREET ADDRESS	30 ROCKEFELLER PLAZA
6.4 CITY ST ZIP	NEW YORK, N.Y. 10112

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)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Arthur Angstreich, Assistant Treasurer

DATE: 7/14/95 BY: G. G. G. G.