

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

FILED
Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90016 013 ***150.00

DOCUMENT # P36434

1. Corporation Name

NBC NEWS CHANNEL, INC.

Principal Place of Business

925 WOODRIDGE CENTER DR.
CHARLOTTE NC 10112
US

Mailing Address

30 ROCKEFELLER PLAZA
ATTN: LAW DEPARTMENT
NEW YORK NY 10112
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1991

4. FEI Number

13-3259401

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME HORNER, ROBERT
STREET ADDRESS 925 WOODRIDGE CENTER DR
CITY-ST-ZIP CHARLOTTE NC

TITLE S ☒ DELETE
NAME STANDER, STEPHEN
STREET ADDRESS 30 ROCKEFELLER CENTER
CITY-ST-ZIP NEW YORK NY

TITLE T ☒ DELETE
NAME JENSEN, WARREN
STREET ADDRESS 30 ROCKEFELLER CENTER
CITY-ST-ZIP NEW YORK NY 10112

TITLE C ☐ DELETE
NAME LACK, ANDREW
STREET ADDRESS 30 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK NY

TITLE AT ☒ DELETE
NAME THURSTON, SALLY
STREET ADDRESS 30 ROCKEFELLER PLAZA
CITY-ST-ZIP NEW YORK NY 10112

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VPD ☐ Change ☒ Addition
1.2 NAME Hoey, Phil
1.3 STREET ADDRESS 30 Rockefeller Plaza
1.4 CITY-ST-ZIP New York, NY 10112

2.1 TITLE S ☒ Change ☐ Addition
2.2 NAME Newell, Elizabeth A.
2.3 STREET ADDRESS 30 Rockefeller Plaza
2.4 CITY-ST-ZIP New York, NY 10112

3.1 TITLE T ☒ Change ☐ Addition
3.2 NAME Begor, Mark
3.3 STREET ADDRESS 30 Rockefeller Plaza
3.4 CITY-ST-ZIP New York, NY 10112

4.1 TITLE AT ☐ Change ☒ Addition
4.2 NAME Black, Kenneth
4.3 STREET ADDRESS 30 Rockefeller Plaza
4.4 CITY-ST-ZIP New York, NY 10112

5.1 TITLE AS ☐ Change ☒ Addition
5.2 NAME Jablonski, Charles
5.3 STREET ADDRESS 30 Rockefeller Plaza
5.4 CITY-ST-ZIP New York, NY 10112

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth A. Newell

Date

2/25/99

(212) 664-4444

Daytime Phone #

CR2E034 (11/98)