

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT -
1995



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

APPROVED
FILED

5 MAY 1 1995
SECRETARY OF STATE
TREASURY, FLORIDA

DOCUMENT # **817591** (1)

1. Corporation Name
ABC NEWS INC

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
C/O TAX DEPT., 11TH FLOOR 77 W. 66TH ST. NEW YORK N Y 10023	C/O TAX DEPT., 11TH FLOOR 77 W. 66TH ST. NEW YORK N Y 10023

3. Date Incorporated or Qualified 01/02/1964	3a. Date of Last Report 05/01/1994
4. FEI Number 13-1996301	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under §. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24 Zip	25 Country
29 Zip	30 Country

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	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 the filer) (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	ARLEDGE, ROONE
STREET ADDRESS	47 W. 66TH ST.
CITY ST ZIP	NEW YORK NY
TITLE	VD
NAME	DOERFLER, RONALD
STREET ADDRESS	77 W. 66TH ST.
CITY ST ZIP	NEW YORK NY
TITLE	S
NAME	FARNSWORTH, PHILIP R.
STREET ADDRESS	77 W. 66TH ST.
CITY ST ZIP	NEW YORK NY
TITLE	T
NAME	VONDRAK, DAVID J.
STREET ADDRESS	77 W. 66TH ST.
CITY ST ZIP	NEW YORK, N Y
TITLE	V
NAME	FOXLEY, GRIFFITH
STREET ADDRESS	77 W. 66TH ST.
CITY ST ZIP	NEW YORK, N Y
TITLE	D
NAME	WEISWASSER, STEPHEN A
STREET ADDRESS	77 WEST 66TH ST
CITY ST ZIP	NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	Executive V.P./Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	Friedman, Paul
3. STREET ADDRESS	47 West 66th Street
4. CITY ST ZIP	New York, NY 10023
21. TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22. NAME	Edelson, Allan
23. STREET ADDRESS	77 West 66th Street
24. CITY ST ZIP	New York, NY 10023
31. TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32. NAME	Wald, Richard
33. STREET ADDRESS	47 West 66th Street
34. CITY ST ZIP	New York, NY 10023
41. TITLE	Assistant Treasurer, V.P. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42. NAME	Goldberg, James
43. STREET ADDRESS	77 West 66th Street
44. CITY ST ZIP	New York, NY 10023
51. TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52. NAME	Westin, David
53. STREET ADDRESS	77 West 66th Street
54. CITY ST ZIP	New York, NY 10023
61. TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	Braverman, Alan
63. STREET ADDRESS	77 West 66th Street
64. CITY ST ZIP	New York, New York 10023

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 110.07(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 or all 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 checked off on an attachment with an address.

SIGNATURE: _____ Andrew C. Governali, 4/26/95 (212) 456-6566
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Typed Name)
Assistant Treasurer

817591

ABC News, Inc.
Florida Corporation Annual Report
1995

Attachment 1

CORPORATE OFFICERS AND DIRECTORS - CONTINUED

TITLE	NAME	STREET ADDRESS
Assistant Treasurer	Andrew C. Governali	77 West 66th Street New York, New York 10023
Assistant Secretary	Mark Haddon	77 West 66th Street New York, New York 10023