

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853200

Entity Name: COX MEDIA, INC.

FILED  
Apr 13, 2005  
Secretary of State

**Current Principal Place of Business:**

1400 LAKE HEARN DRIVE  
ATLANTA, GA 30319 US

**New Principal Place of Business:**

**Current Mailing Address:**

1400 LAKE HEARN DRIVE  
MAILSTOP CP-12 / ATTN:CORP TAX 12TH FLR  
ATLANTA, GA 30319 US

**New Mailing Address:**

FEI Number: 58-1444671      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TELLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROBBINS, JAMES  
Address: 1400 LAKE HEARN DRIVE  
City-St-Zip: ATLANTA, GA 30319

Title: VP ( ) Delete  
Name: BARNETT, PRESTON B  
Address: 1400 LAKE HEARN DRIVE  
City-St-Zip: ATLANTA, GA 30319

Title: T ( ) Delete  
Name: COKER, SUSAN  
Address: 1400 LAKE HEARN DR.  
City-St-Zip: ATLANTA, GA 30319

Title: S ( ) Delete  
Name: MERDEK, ANDREW A  
Address: 1400 LAKE HEARN DR  
City-St-Zip: ATLANTA, GA 30319

Title: D ( ) Delete  
Name: HATCHER, JAMES  
Address: 1400 LAKE HEARN DR  
City-St-Zip: ATLANTA, GA 30319

Title: D ( ) Delete  
Name: HAYES, JIMMY  
Address: 1400 LAKE HEARN DR  
City-St-Zip: ATLANTA, GA 30319

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PRESTON B. BARNETT

VP

04/13/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date