

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90074 049 ***150.00

DOCUMENT #

1. Entity Name

F95000004465

WARNER/CHAPPELL MUSIC, INC.

DO NOT WRITE IN THIS SPACE

657912

2. Principal Place of Business
10585 SANTA MONICA BLVD

Suite, Apt. #, etc.

3. Mailing Address
% JANICE CANNON

Suite, Apt. #, etc.

75 ROCKEFELLER PLAZA

DO NOT WRITE IN THIS SPACE

City & State
LOS ANGELES, CA

City & State
NEW YORK, NY

4. FEI Number
13-3246913

Applied For
Not Applicable

Zip
90025

Country
USA

Zip
10019

Country
USA

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required.

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND RD.

City
PLANTATION

FL

Zip Code
33324

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DCCEO
BIDER, LESLIE E
10585 SANTA MONICA BLVD
LOS ANGELES, CA 90025

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVPS
JOHNSON, DAVID H
75 ROCKEFELLER PLAZA
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVPT
MURPHY, HELEN
75 ROCKEFELLER PLAZA
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
AMES, ROGER
75 ROCKEFELLER PLAZA
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
CANNON, JANICE
75 ROCKEFELLER PLAZA
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
SOLOMON, JAMES M
75 ROCKEFELLER PLAZA
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address with all other like empowered.

SIGNATURE *Janice Cannon*

JANICE CANNON 4/29/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)