



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2014

**1. ID No.** 000818602

**2. Exact Name of the Limited Liability Company** TVL Broadcasting LLC

**3. State of Formation**

State: DE

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

Television Station/Digital Media

**5. Principal Office Address**

No. and Street: 333 E. FRANKLIN STREET

City or Town: RICHMOND

State: VA

Zip: 23219

Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: LISA MANNING Contact Title: ASSISTANT SECRETARY OF MANAGING MEMBER

No. and Street: ONE WEST EXCHANGE STREET, SUITE 5A

SUITE 5A

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	VINCENT SADUSKY	701 BRAZOS STREET, SUITE 800 AUSTIN, TX 78701 USA
MANAGER	ANDREW C CARINGTON	333 E. FRANKLIN STREET RICHMOND, VA 23219 USA
MANAGER	JAMES F WOODWARD	333 E FRANKLIN STREET RICHMOND, VA 23219 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE ,  
RI 02914

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 27 Day of February, 2015 at 11:36:17 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By LISA MANNING  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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