

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90062 040 ***150.00

0613064 AT

DOCUMENT # 675996

1. Entity Name

JACOR COMMUNICATIONS COMPANY

Principal Place of Business

**200 EAST BASSE RD.
 SAN ANTONIO TX 78209
 US**

Mailing Address

**200 EAST BASSE RD.
 SAN ANTONIO TX 78209
 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

200 E Basse Rd, A#n 5 Tolbert
 City & State

Suite, Apt. #, etc.

200 E Basse Rd, A#n 5 Tolbert
 City & State

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

4. FEI Number

59-2054850

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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 **VS** ☐ Delete
 NAME **WYKER, KENNETH**
 STREET ADDRESS **200 EAST BASSE ROAD**
 CITY-ST-ZIP **SAN ANTONIO TX 78209**

TITLE **PD** ☐ Delete
 NAME **MAYS, MARK P**
 STREET ADDRESS **200 EAST BASSE RD.**
 CITY-ST-ZIP **SAN ANTONIO TX 78209**

TITLE **D/C** ☐ Delete
 NAME **MAYS, L. LOWRY**
 STREET ADDRESS **200 EAST BASSE RD.**
 CITY-ST-ZIP **SAN ANTONIO TX 78209**

TITLE **DVT** ☐ Delete
 NAME **MAYS, RANDALL T**
 STREET ADDRESS **200 EAST BASSE RD.**
 CITY-ST-ZIP **SAN ANTONIO TX 78209**

TITLE **V** ☐ Delete
 NAME **ROSALES, STEPHANIE**
 STREET ADDRESS **200 EAST BASSE RD.**
 CITY-ST-ZIP **SAN ANTONIO TX 78209**

TITLE **V** ☐ Delete
 NAME **LITTLEJOHN, JEFF**
 STREET ADDRESS **50 EAST RIVERCENTER BLVD, 12TH FLOOR**
 CITY-ST-ZIP **COVINGTON KY 41011**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephanie Rosales, Vice President

2/13/02 (202) 821-3008

Date

Daytime Phone #

CR2E034 (9/01)