

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 12:18

DOCUMENT # F94000004971 (7)

1. Corporation Name

CHANCELLOR BROADCASTING COMPANY

Principal Place of Business

Mailing Address

~~XXXXXXXXXXXX~~
~~XXXXXXXXXXXX~~

~~XXXXXXXXXXXX~~
~~XXXXXXXXXXXX~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 09/26/1994	3a. Date of Last Report
4. FEI Number 75-2544623	Applied For <input type="checkbox"/> 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 S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 **2101 State Rd. 434 #320**

26 **2101 State Rd. 434 #320**

Suite, Apt. #, etc
Suite 320

Suite, Apt. #, etc.
Suite 320

22 City & State

27 City & State

23 **Longwood FL**

28 **Longwood FL**

24 Zip

25 Country

29 Zip

30 Country

32779

USA

32779

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

B1 Name	B5 Zip Code
B2 Street Address (P.O. Box Number is Not Acceptable)	FL
B3	
B4 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 of Current Registered Agent required when registered)

(Signature of New Registered Agent required when registered)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 NAME	PSD DINETZ, STEVEN	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 STREET ADDRESS	9030 WOODHURST DRIVE	12 NAME	
13 CITY, ST, ZIP	DALLAS TX 75243	13 STREET ADDRESS	12655 N. Central Expy. #321
14 CITY, ST, ZIP		14 CITY, ST, ZIP	Dallas, Texas 75243
15 NAME		15 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
16 STREET ADDRESS		16 NAME	Eric W. Neumann
17 CITY, ST, ZIP		17 STREET ADDRESS	12655 N. Central Expy. #321
18 CITY, ST, ZIP		18 CITY, ST, ZIP	Dallas, Texas 75243
19 NAME		19 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
20 STREET ADDRESS		20 NAME	
21 CITY, ST, ZIP		21 STREET ADDRESS	
22 CITY, ST, ZIP		22 CITY, ST, ZIP	
23 NAME		23 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
24 STREET ADDRESS		24 NAME	
25 CITY, ST, ZIP		25 STREET ADDRESS	
26 CITY, ST, ZIP		26 CITY, ST, ZIP	
27 NAME		27 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
28 STREET ADDRESS		28 NAME	
29 CITY, ST, ZIP		29 STREET ADDRESS	
30 CITY, ST, ZIP		30 CITY, ST, ZIP	
31 NAME		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 STREET ADDRESS		32 NAME	
33 CITY, ST, ZIP		33 STREET ADDRESS	
34 CITY, ST, ZIP		34 CITY, ST, ZIP	
35 NAME		35 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
36 STREET ADDRESS		36 NAME	
37 CITY, ST, ZIP		37 STREET ADDRESS	
38 CITY, ST, ZIP		38 CITY, ST, ZIP	
39 NAME		39 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
40 STREET ADDRESS		40 NAME	
41 CITY, ST, ZIP		41 STREET ADDRESS	
42 CITY, ST, ZIP		42 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(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 shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE: Eric W. Neumann, Sr. VP January 18, 1995 239-6220
DATE