

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F94000005085 (5)**

1. Corporation Name

**CLEAR CHANNEL RADIO, INC.**



Principal Place of Business

200 CONCORD PLAZA  
SUITE 600  
SAN ANTONIO TX 78216

Mailing Address

200 CONCORD PLAZA  
SUITE 600  
SAN ANTONIO TX 78216

3. Date Incorporated or Qualified **09/29/1994**      3a. Date of Last Report **10/11/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number **74-2722883**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324**

81 Name

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

83

84 City

**FL**

85

Zip Code

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, typed or printed name of registered agent and the filer (signature)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                 |                                   |                                 |
|-----------------|-----------------------------------|---------------------------------|
| TITLE           | <b>CEO</b>                        | <input type="checkbox"/> DELETE |
| NAME            | <b>MAYS, L. LOWRY</b>             |                                 |
| STREET ADDRESS  | <b>7710 JONES MALTSBERGER RD.</b> |                                 |
| CITY - ST - ZIP | <b>SAN ANTONIO TX 78216</b>       |                                 |
| TITLE           | <b>V</b>                          | <input type="checkbox"/> DELETE |
| NAME            | <b>WYKER, KENNETH E</b>           |                                 |
| STREET ADDRESS  | <b>7710 JONES MALTSBERGER RD.</b> |                                 |
| CITY - ST - ZIP | <b>SAN ANTONIO TX 78216</b>       |                                 |
| TITLE           | <b>V</b>                          | <input type="checkbox"/> DELETE |
| NAME            | <b>MAYS, MARK P</b>               |                                 |
| STREET ADDRESS  | <b>7710 JONES MALTSBERGER RD.</b> |                                 |
| CITY - ST - ZIP | <b>SAN ANTONIO TX 78216</b>       |                                 |
| TITLE           | <b>V</b>                          | <input type="checkbox"/> DELETE |
| NAME            | <b>HILL, HERBERT W JR</b>         |                                 |
| STREET ADDRESS  | <b>7710 JONES MALTSBERGER RD.</b> |                                 |
| CITY - ST - ZIP | <b>SAN ANTONIO TX 78216</b>       |                                 |
| TITLE           | <b>VT</b>                         | <input type="checkbox"/> DELETE |
| NAME            | <b>MAYS, RANDALL</b>              |                                 |
| STREET ADDRESS  | <b>7710 JONES MALTSBERGER RD.</b> |                                 |
| CITY - ST - ZIP | <b>SAN ANTONIO TX 78216</b>       |                                 |
| TITLE           | <b>D</b>                          | <input type="checkbox"/> DELETE |
| NAME            | <b>MCCOMBS, B J</b>               |                                 |
| STREET ADDRESS  | <b>7710 JONES MALTSBERGER RD.</b> |                                 |
| CITY - ST - ZIP | <b>SAN ANTONIO TX 78216</b>       |                                 |

|                     |   |
|---------------------|---|
| 1.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            |   |
| 1.3 STREET ADDRESS  |   |
| 1.4 CITY - ST - ZIP |   |
| 2.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            |   |
| 2.3 STREET ADDRESS  |   |
| 2.4 CITY - ST - ZIP |   |
| 3.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME            |   |
| 3.3 STREET ADDRESS  |   |
| 3.4 CITY - ST - ZIP |   |
| 4.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME            |   |
| 4.3 STREET ADDRESS  |   |
| 4.4 CITY - ST - ZIP |   |
| 5.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME            |   |
| 5.3 STREET ADDRESS  |   |
| 5.4 CITY - ST - ZIP |   |
| 6.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME            |   |
| 6.3 STREET ADDRESS  |   |
| 6.4 CITY - ST - ZIP |   |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Herbert W Hill Jr* **Herbert W Hill Jr** 5/1/96 (210) 822-2828

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

PHONE #

CR2E034 (12/95)