

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005085

FILED
Apr 29, 2010
Secretary of State

Entity Name: CLEAR CHANNEL BROADCASTING, INC.

Current Principal Place of Business:

200 E BASSE ROAD
SAN ANTONIO, TX 78209 US

New Principal Place of Business:

Current Mailing Address:

200 E BASSE ROAD
SAN ANTONIO, TX 78209 US

New Mailing Address:

FEI Number: 74-2722883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP
Name: BICK, SCOTT
Address: 200 E BASSE ROAD
City-St-Zip: SAN ANTONIO, TX 78209 US

Title: SEC
Name: WALLS, JR., ROBERT H
Address: 200 E BASSE ROAD
City-St-Zip: SAN ANTONIO, TX 782098328 US

Title: DIR
Name: MAYS, MARK P
Address: 200 E BASSE ROAD
City-St-Zip: SAN ANTONIO, TX 782098328 US

Title: PRES
Name: HOGAN, JOHN
Address: 200 E BASSE ROAD
City-St-Zip: SAN ANTONIO, TX 782098328 US

Title: TREA
Name: COLEMAN, BRIAN
Address: 200 E BASSE ROAD
City-St-Zip: SAN ANTONIO, TX 78209 US

Title: CFAO
Name: GOLDSTEIN, MITCHELL
Address: 200 E BASSE ROAD
City-St-Zip: SAN ANTONIO, TX 782098328 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT BICK

VP

04/29/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date