## 2005 FOR PROFIT CORPORATION ANNUAL REPORT



**FILED** Apr 13, 2005 8:00 am Secretary of State

DOCUMENT # F9700001611  1. Entity Name VIACOM STATIONS GROUP OF DETROIT INC.							04-13-2005	90022 031	***15	0.00	
Principal Plac % MICHAEL I 1515 BROAD NEW YORK, N	D. FRICKLAS Dway	Mailing Address  % MICHAEL D. FRICKLAS 1515 BROADWAY NEW YORK, NY 10036									
2. Principal P	lace of Business	3. Mailing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				03142005	Chg-P	CR2E034 (	(10/03)		
City & State		City & State			4. FEI Number 54-1169				plied For t Applicable		
Zip	Country	Zip	Coun	try		5. Certificate of	of Status Desired		. <b>75</b> Add Required		
	6. Name and Address of Current	Registered Agent				7. Name and	Address of New Re	gistered Age	nt		
· Strain was					Name						
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301				Street Address (P.O. Box Number is Not Acceptable)							
TALE WE											
				City				FL	Zip Code	9	
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, Speed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.						00 May Be ed to Fees					
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/0	HANGES TO OFFI	CERS AND DIF	RECTORS	S IN 11	
TITLE	7- 2000		TITLE					Addition			
NAME STREET ADDRESS CITY-ST-ZIP	I			E Et address - St-Zip	513	FREDRIC G, REYNOLDS 513 W. 57+n St. YEW YURK, NY 10019					
IIILE	DEVS Delete TITL		TITLE			(0 )	.,		Change	Addition	
NAME			NAM					_	0.127.60		
STREET ADDRESS	1515 BROADWAY STR		STRE	ET ADDRESS							
CITY-ST-ZIP	NEW YORK, NY 10036		CITY	-ST-ZIP							
TITLE NAME STREET ADDRESS	VPAS Delete FUERST, JANE R 1515 BROADWAY		NAM	TITLE NAME STREET ADDRESS					Change	☐ Addition	
CITY-ST-ZIP	NEW YORK, NY 10036		CITY	ST-ZIP							
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NAME CTOCET ADDOCCO			NAME			uneth h					
STREET ADDRESS CITY-ST-ZIP				et address •St-Zip	1515	BROADU V YORK, 1	1AY VI (0036	3			
TITLE	DVP	☐ Delete	TITLE		SVP				Change	☐ Addition	
NAME	GORDON, SUSAN C		NAME		• • •	10			-	_	
STREET ADORESS	<b>■</b>			ET ADDRESS							
City-ST-ZIP	NEW YORK, NY 10036		CITY	-ST-ZIP	<u> </u>						
TITLE		☐ Delete	TITLE						Change	☐ Addition	
NAME STREET ADDRESS (			NAME								
CITY-ST-ZIP	•			T ADDRESS ST-ZIP							
	ertify that the information supplied with	this filing does not qualify for			l	110 07/0V	Decide Charles 1	6 41 15 u			

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Jane R. Fwist,

ASST SECY.

4/7/12005

712 256-6680 Daytime Phone #