


2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000001680 1. Entity Name NEXTMEDIA OUTDOOR, LLC	
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Principal Place of Business 6312 S FIDDLER'S GREEN CIRCLE STE 360E ENGLEWOOD, CO 80111	Mailing Address 6312 S FIDDLER'S GREEN CIRCLE STE 360E ENGLEWOOD, CO 80111
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DO NOT WRITE IN THIS SPACE



01082004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 84-1519700	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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B. 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$50.00
Due by May 1, 2004

U00000019717
01/29/04-80036-017 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HIRSCH, CARL E 6312 S FIDDLER'S GREEN CIRCLE, STE 360E ENGLEWOOD, CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DINETZ, STEVEN 6312 S FIDDLER'S GREEN CIRCLE, STE 360E ENGLEWOOD, CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAXTER, LORI 6312 S FIDDLER'S GREEN CIRCLE, STE 360E ENGLEWOOD, CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STOVER, SEAN 6312 S FIDDLERS GREEN CIRCLE, STE 360E ENGLEWOOD, CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HANSEN, SCHUYLER 6312 S FIDDLERS GREEN CIRCLE, STE 360E ENGLEWOOD, CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 1/29/04 Daytime Phone #: 303-694-9118