

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 835834

FILED
Apr 23, 2009
Secretary of State

Entity Name: KATZ COMMUNICATIONS, INC.

Current Principal Place of Business:

125 W 55TH ST
NEW YORK, NY 10014

New Principal Place of Business:

125 W 55TH ST
NEW YORK, NY 10019

Current Mailing Address:

125 W 55TH ST
NEW YORK, NY 10014

New Mailing Address:

125 W 55TH ST
TAX DEPT.
NEW YORK, NY 10019

FEI Number: 13-0904500

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: CEO () Delete
Name: OLDS, STUART O.
Address: 125 WEST 55TH STREET
City-St-Zip: NEW YORK, NY

Title: VPT () Delete
Name: DAMON, ROBERT
Address: 125 WEST 55 TH ST
City-St-Zip: NEW YORK, NY 10019

Title: PCOO () Delete
Name: MAYS, MARK P
Address: 125 WEST 55TH STREET
City-St-Zip: NEW YORK, NY 10019

Title: VPS () Delete
Name: BELOYIANIS, JAMES E.
Address: 125 WEST 55TH STREET
City-St-Zip: NEW YORK, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN WATSON

VP F

04/23/2009

Electronic Signature of Signing Officer or Director

Date