

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90006 017 ***550.00

DOCUMENT # F00000004135

1. Entity Name

TRIAD BROADCASTING COMPANY, INC.

Principal Place of Business

**2511 GARDEN ROAD, BUILDING A, STE. 104
 MONTEREY CA 93940-5376**

Mailing Address

**2511 GARDEN ROAD, BUILDING A, STE. 104
 MONTEREY CA 93940-5376**

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

NA

Suite, Apt. #, etc.

NA

City & State

MONTEREY CA

City & State

MONTEREY CA

Zip

Country

Zip

Country

SAME

SAME

4. FEI Number

36-4244580

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **BENJAMIN, DAVID J III**
 STREET ADDRESS **2511 GARDEN ROAD, BUILDING A, STE. 104**
 CITY-ST-ZIP **MONTEREY CA 93940-5376**

TITLE **VCFO** ☐ Delete
 NAME **DOUGLAS, THOMAS S**
 STREET ADDRESS **2511 GARDEN ROAD, BUILDING A, STE. 104**
 CITY-ST-ZIP **MONTEREY CA 93940-5376**

TITLE **S** ☐ Delete
 NAME **PETERSON, JUDYTH V**
 STREET ADDRESS **2511 GARDEN ROAD, BUILDING A, STE. 104**
 CITY-ST-ZIP **MONTEREY CA 93940-5376**

TITLE **D** ☐ Delete
 NAME **LINDAHL, JOHN E**
 STREET ADDRESS **222 SOUTH 9TH STREET**
 CITY-ST-ZIP **MINNEAPOLIS MN 55402**

TITLE **D** ☐ Delete
 NAME **MONAGHAN, ARTHUR R**
 STREET ADDRESS **222 SOUTH 9TH STREET**
 CITY-ST-ZIP **MINNEAPOLIS MN 55402**

TITLE **D** ☐ Delete
 NAME **COUCH, GEORGE W**
 STREET ADDRESS **104 LEE ROAD**
 CITY-ST-ZIP **WATSONVILLE CA 25077**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JUDYTH PETERSON
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-2-01 831-655-6350
 Date Daytime Phone #

0136222 AT

CR2E034 (5/01)