

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F75846

1. Entity Name

Moffat Communications, Inc.



FILED  
04 APR 28 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

50 Francisco Street

Suite, Apt. #, etc.

Suite 120

3. Mailing Address

50 Francisco Street

Suite, Apt. #, etc.

Suite 120

DO NOT WRITE IN THIS SPACE

City & State

San Francisco, CA

City & State

San Francisco, CA

4. FEI Number

59-2202161

Applied For

Not Applicable

Zip

94133

Country

USA

Zip

94133

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name NRAI Services, Inc.

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

526 E. Park Avenue

City Tallahassee

FL

Zip Code 32301

**DO NOT WRITE  
IN THIS SPACE**

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 Paul J. Hagan Paul J. Hagan, Assistant Secretary April 13, 2004

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE Director  
NAME John P. McNabola  
STREET ADDRESS 50 Francisco Street, Suite 120  
CITY-ST-ZIP San Francisco, CA 94133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
400035822164  
05/10/04--01079--012 \*\*150.00

TITLE President  
NAME John P. McNabola  
STREET ADDRESS 50 Francisco Street, Suite 120  
CITY-ST-ZIP San Francisco, CA 94133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Secretary  
NAME John P. McNabola  
STREET ADDRESS 50 Francisco Street, Suite 120  
CITY-ST-ZIP San Francisco, CA 94133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Treasurer  
NAME John P. McNabola  
STREET ADDRESS 50 Francisco Street, Suite 120  
CITY-ST-ZIP San Francisco, CA 94133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Assistant Secretary  
NAME Tim Conn  
STREET ADDRESS 50 Francisco Street, Suite 120  
CITY-ST-ZIP San Francisco, CA 94133

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STREET ADDRESS  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034B (12/02)

ASST SECRET 4-8-2004 415-288-9435