## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300005281 (1)

DAYTONA BEACH BROADCASTING CORP. Principal Place of Business Mailino Address 130 MASON STREET 130 MASON STREET 405 LEXINGTON AVE., 54TH FLOOR 405 LEXINGTON AVE., 54TH FLOOR GREENSWICH CT 08830 **GREENWICH CT 06830-6670** 3a. Date of Last Report 3. Date incorporated or Qualified 05/01/1996 11/19/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3223390 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Bo  $\Box$ 23 Trust Fund Contribution 28 Added to Fees Ζıp Country Country 24 29 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 81 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE (96/6) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addilion DELETE TITLE 1.11016 OSBORN, FRANK D 1.2 NAME CR2E034 NAME 130 MASON STREET STREET ADDRESS 1.3 STREET ADDRESS **GREENWICH CT** 1.4 C(1Y - \$1 - ZIP CITY-ST-ZIP DELETE 2 1 TITLE Change Addition TITLE DOUGLAS, THOMAS S NAME 2.2 NAME 130 MASON STREET 2.3 STREET ADDRESS STREET ADDRESS GREENWICH CT CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DITETE Change Addition TITLE 3 1 TIT(E MANGAN, MICHAEL F NAME 3.2 NAME 130 MASON STREET 3.3 STREET ADDRESS STREET ADDRESS **GREENWICH CT** 3.4. CHY- \$1-7IP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 51 IMUF 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADORESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE ☐ Change THLE 6 1 10 LE 6.2 NAME NAMÉ STREEL ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - \$1 - 7IP

14. I do 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 annual report or supplemental annual 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 comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

CICNIATURE.

Michael F. Mangan

7/3/97 (203)629-090

**FILED** 

Secretary of State

Jul 16 1997 8:00am