DOCUMENT # F9400001610 1. Entity Name

AMERICAN TELECASTING OF JACKSONVILLE, INC.

Principal Place of Business

5575 TECH CTR DR

STE 300

COL SPRINGS CO 80919

Suite, Apt. #, etc.

City & State

Mailing Address

5575 TECH CENTER DR.

STE. 300

COLORADO SPRINGS CO 80919

2. Principal Place of Business

KS: HL. 5X57X

6500 SPRINT PARKWAY

3. Mailing Address

6500 SPRINT PARKWAY

Suite, Apt. #, etc. MS: HL-5ASTX

OVERLAND PARK, KS

USA

City & State OVERLAND PARK, KS

FILED Mar 12, 2001 8:00 am Secretary of State

03-12-2001 90479 027 ***150.00

UUU24324



DO NOT WRITE IN THIS SPACE

Applied For 84-1268202 Not Applicable

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, STE 105 TALLHASSSEE FL 32301

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

Name -

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

4 FFI Number

Certificate of Status Desired

7. Name and Address of New Registered Agent

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

(See criteria on back)

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

FILE NOW!!! FEE IS \$150.00

(NOTE: Registered Agent signature required when reinstating)

After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Delete TITLE TITLE 2330 SHAWNEE MISSION DARKWAY SUTTON, TIMOTHY S NAME NAME 6612 W 132ND ST STREET ADDRESS STREET ADDRESS WESTWOOD, KS 66205 CITY-ST-ZIP **OVERLAND PARK K\$ 66209** CITY-ST-ZIP Delete TITLE LIANE J. PELLETIER
2330 SHAWNEE MISSION PARKWAY TITLE SCHELL, THEODORE H NAME NAME 1272 W 59TH ST STREET ADDRESS STREET ADDRESS WESTWOOD, KS 66205 KANSAS CITY MO 64113 CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete BETTS, GENE M ~ ~ NAME 2330 SHAWNEE MISSION PARKWAY NAME 11701 BROOKWOOD STREET ADDRESS STREET ADDRESS WESTWOOD, K5 66205 CITY-ST-ZIP CITY-ST-ZIP **LEAWOOD KS 66211** Change ☐ Addition TITLE ☐ Delete TITLE OZENBERGER, LAURA L NAME NAME 2330 SHAWNEE MISSION PARKWAY STREET ADDRESS 5704 N WOODLAND POINTE STREET ADDRESS WESTWOOD, KS 66205 PARKVILLE MO 64152 CITY-ST-ZIP CITY-ST-ZIF Change **►** Addition TITLE ☐ Delete TITLE MARK V. BESHEHRS NAME NAME 6500 SPAINT PARKWAY STREET ADDRESS STREET ADDRESS OVERLAND PARK, 4566251-5997 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE MICHAEL T. HYDE 2330 SHAWNEE MUSION PARKWAY NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTWOOD, KS 66205 CITY-ST-7IP

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: ≥

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK V. BESHEARS × 3/9/01