

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90125 005 ***150.00

DOCUMENT # F96000002318**1. Entity Name**
ELLER MEDIA COMPANY**Principal Place of Business**2850 EAST CAMELBACK
SUITE 300
PHOENIX AZ 85016**Mailing Address**200 EAST BASSE ROAD
SAN ANTONIO TX 78209**609446**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 86-0801051Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75 Additional**
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 \$150.00**
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**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Delete
NAME P
STREET ADDRESS MEYER, PAUL J
CITY-ST-ZIP 2850 E. CAMELBACK RD., #300
PHOENIX AZ 85016TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME D
STREET ADDRESS MAYS, LOWRY
CITY-ST-ZIP 200 E. BASSE RD.
SAN ANTONIO TX 78209TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME D
STREET ADDRESS MAYS, RANDALL T
CITY-ST-ZIP 200 E. BASSE RD.
SAN ANTONIO TX 78209TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME D
STREET ADDRESS MAYS, MARK P
CITY-ST-ZIP 200 E. BASSE RD
SAN ANTONIO TX 78209TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME VPCT
STREET ADDRESS ROSALES, STEPHANIE
CITY-ST-ZIP 200 E. BASSE RD.
SAN ANTONIO TX 78209TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☒ Delete
NAME VP
STREET ADDRESS HILL, HERBERT W JR.
CITY-ST-ZIP 200 E. BASSE RD
SAN ANTONIO TX 78209TITLE ☐ Change ☒ Addition
NAME Vice President
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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)