2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2002 8:00 am Secretary of State DOCUMENT # F96000004956 1. Entity Name -2002 90119 039 ***150 COX TARGET MEDIA SALES, INC. Principal Place of Business Mailing Address 1400 LAKE HEARN DRIVE 1400 LAKE HEARN DRIVE ATLANTA GA 30319 ATLANTA GA 30319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 58-2220120 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required - 6.- Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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. A和利用於45.0000 THE TAKE HEAVE DRIVE HE SIGNATURE Signature, typet of printed lame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. VICE PRESIDENT CR2E034 (9/01) ☐ Delete TITLE NAME COOPER, BRIAN G NAME STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30319 PRESIDENT + DIRECTOR TITLE TITLE Change ☐ Addition Delete SMAN NAME DISBROW, WILLIAM B STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE, NE CITY-ST-ZIP CITY-ST-ZIP # ATLANTA GA 30319 ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME SMITH, JAY R STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE, NE CITY-ST-ZIP CITY-ST-ZIF ATLANTA GA 30319 ☐ Addition Change TITLE ☐ Delete TITLE **VP** MAME BARNETT, PRESTON B NAME STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE NE CITY-ST-ZIE ATLANTA GA 30319 CITY-ST-ZIP SECRE TARY DIRECTOR TITL F ☐ Delete TITLE Change ☐ Addition NAME NAME MERDEK, ANDREW A STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE. NE CITY-ST-ZIP CITY-ST-ZIP atlanta ga 30319

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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE

SOLOMON, CHARLES B

ATLANTA GA 30319

1400 LAKE HEARN DRIVE NE

TITLE

STREET ADDRESS

CITY-ST-ZIP

PRESTON D. BARNETT

□ Delete

Change

☐ Addition