2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000004160

Entity Name: ABC RADIO NETWORK, INC.

FILED Apr 21, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
13725 MONTFORT DR DALLAS, TX 75240 US				
Current Mailing Address:			New Mailing Address:	
500 S BUENA VISTA ST BURBANK, CA 915210586 US				
FEI Number:	13-3331730	FEI Number Applied For () FEI Num	nber Not Applicable()	Certificate of Status Desired ()
Name and A	Address of Cเ	ırrent Registered Agent:	Name and Address of	New Registered Agent:
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US				
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:				
	Electronic	Signature of Registered Agent		Date
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () [KELLER, TRAUG 13725 MONTFOR DALLAS, TX 752	RT DR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AT () E BUETTNER, ANN 500 S BUENA VIS BURBANK, CA 9	STA ST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () EREED, MARSHA 500 S BUENA VIS BURBANK, CA 9	STA ST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () ETHOMPSON, DA'S 500 S BUENA VISBURBANK, CA 9	STA ST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () E YOUNGER, LAUF 500 S BUENA VIS BURBANK, CA 9	STA ST	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () EBRAVERMAN, AL 500 S BUENA VIS BURBANK, CA 9	STA ST	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARSHA L. REED S 04/21/2003