

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000004411

1. Entity Name

CUMULUS BROADCASTING, INC.

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91077 024 ***150.00

Principal Place of Business

Mailing Address

875 NORTH MICHIGAN, SUITE 3650
CHICAGO IL 60611

875 NORTH MICHIGAN, SUITE 3650
CHICAGO IL 60611

3535 Piedmont Road

3535 Piedmont Road

2. Principal Place of Business
Bldg 14, Ste 1400

3. Mailing Address
Bldg 14, Ste 1400

Suite, Apt. #, etc.
Atlanta, GA 30305

Suite, Apt. #, etc.
Atlanta, GA 30305

City & State

City & State

4. FEI Number 36-4166963

Applied For
Not Applicable

Zip Country
USA

Zip Country
USA

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 S
NAME LEAHY, TERRENCE ☒ Delete
STREET ADDRESS 111 E. KILBOURN AVE
CITY-ST-ZIP MILWAUKEE WI 53202

TITLE S
NAME Martin Gausvik ☐ Change ☒ Addition
STREET ADDRESS 3535 Piedmont Rd., Atlanta, GA 30305
CITY-ST-ZIP

TITLE D
NAME WEENING, RICHARD ☒ Delete
STREET ADDRESS 111 E. KILBOURN AVE
CITY-ST-ZIP MILWAUKEE WI 53202

TITLE V
NAME John Dickey ☐ Change ☒ Addition
STREET ADDRESS 3535 Piedmont Rd., Atlanta, GA 30305
CITY-ST-ZIP

TITLE D
NAME DICKEY, LEW ☐ Delete
STREET ADDRESS 3060 PEACHTREE RD NW
CITY-ST-ZIP ATLANTA GA 30305

TITLE P
NAME Lewis Dickey, Jr. ☒ Change ☐ Addition
STREET ADDRESS 3535 Piedmont Rd., Atlanta, GA 30305
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE T
NAME Martin Gausvik ☐ Change ☒ Addition
STREET ADDRESS 3535 Piedmont Road, Atlanta, GA 30305
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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)