## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED DOCUMENT # F9900000489 Jul 26, 2000 8:00 am **Secrétary of State** P&S GEORGIA BROADCASTING, INC. 07-26-2000 90012 040 \*\*\*550.00 Principal Place of Business Mailing Address 1100 WILSON BLVD. 1100 WILSON BLVD. **ARLINGTON VA 22234** ARLINGTON VA 22234 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number APPLIED FOR Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition TITLE Change TITLE ☐ Delete CURLEY, JOHN J NAME NAME STREET ADDRESS 1100 WILSON BLVD. STREET ADDRESS CITY-ST-ZIP **ARLINGTON VA 22234** CITY-ST-ZIP ☐ Addition Change ☐ Defete TITLE MCCORKINDALE, DOUGLAS H NAME STREET ADDRESS 1100 WILSON BLVD. STREET ADDRESS CITY-ST-716 ARLINGTON VA 22234 CITY-ST-ZIP Addition Delete TITLE Change TITLE IVEY. DENISE H NAME NAME ONE NEWS JOURNAL PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL 32501 TITLE ☐ Change ☐ Addition TITLE ☐ Delete OTTENSMEYER, RICHARD C NAME NAME ONE NEWS JOURNAL PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PENSACOLA FL 32501 ☐ Delete TITLE Change ☐ Addition CHAPPLE, THOMAS L NAME NAME STREET ADDRESS STREET ADDRESS 1100 WILSON BLVD. CITY-ST-ZIP CITY-ST-ZIP ARLINGTON VA 22234 ☐ Addition Delete TITLE ☐ Change MARTORE, GARCIA C NAME NAME STREET ADDRESS STREET ADDRESS 1100 WILSON BLVD. CITY-ST-ZIP ARLINGTON VA 22234

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 attackment and dress, with all other like empowered.

SIGNATURE:

CHRISTOPHER W. BALDWIN, ASST. TREASURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

7/21/00

703-284-6000

.R2E034 (5/C