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Jun 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J39912 (7)

1. Corporation Name
ROPER BROADCASTING, INC.

Principal Place of Business	Mailing Address
C/O ROBERT T. ROWLAND, SR. P. O. BOX 7010 ROCKLEDGE FL 32955	C/O ROBERT T. ROWLAND, SR. P. O. BOX 7010 ROCKLEDGE FL 32955

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/29/1986

2. Principal Place of Business
21 1055 Fieldstone Dr.
Suite, Apt. #, etc.
22
City & State
23 Melbourne, Fl.
Zip 24 32940 Country 25 USA

2a. Mailing Address
26 1055 Fieldstone Dr.
Suite, Apt. #, etc.
27
City & State
28 Melbourne, Fl.
Zip 29 32940 Country 30 USA

4. FEI Number: 59-2742966 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
ROWLAND, ROBERT T., SR.
2355 PLUCKEBAUM RD.
COCOA FL 32926
(same agent-new address)

10. Name and Address of New Registered Agent
81 Name: Robert T. Rowland, Sr.
82 Street Address (P.O. Box Number is Not Acceptable)
83 1055 Fieldstone Dr.
84 City: Melbourne FL 85 Zip Code: 32940

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ROWLAND, ROBERT T., SR.		1.2 NAME		
STREET ADDRESS	1055 FIELDSTOBE DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-ST-ZIP		
TITLE	STD	☒ DELETE	2.1 TITLE	VSTD	X ☐ Change ☐ Addition
NAME	ROWLAND, GWENDOLYN G.		2.2 NAME	Valree Ann Peralta	
STREET ADDRESS	1055 FIELDSTONE DRIVE		2.3 STREET ADDRESS	1816 Laural Oak Dr.	
CITY-ST-ZIP	MELBOURNE FL		2.4 CITY-ST-ZIP	Rockledge, Fl. 32955	
TITLE	VD	X ☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PERALTA, VALREE A.		3.2 NAME		
STREET ADDRESS	792 KARA CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	ROCKLEDGE FL		3.4 CITY-ST-ZIP		
TITLE	AVD	☐ DELETE	4.1 TITLE	AVD	X ☐ Change ☐ Addition
NAME	PERALTA, DOUGLAS L.		4.2 NAME	Douglas L. Peralta	
STREET ADDRESS	792 KARA CIRCLE		4.3 STREET ADDRESS	1816 Laural Oak Dr.	
CITY-ST-ZIP	ROCKLEDGE FL		4.4 CITY-ST-ZIP	Rockledge, Fl. 32955	
TITLE	AVD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ROWLAND, ROBERT T. J		5.2 NAME		
STREET ADDRESS	1435 AMBRA DR.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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