

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000916

FILED
Apr 12, 2004
Secretary of State

Entity Name: BLACK CROW RADIO PARTNERS, L.L.C.

Current Principal Place of Business:

126 INTERNATIONAL DR.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

126 W INT'L SPEEDWAY BLVD
DAYTONA BEACH, FL 32114

Current Mailing Address:

126 INTERNATIONAL DR.
DAYTONA BEACH, FL 32114

New Mailing Address:

126 W INT'L SPEEDWAY BLVD
DAYTONA BEACH, FL 32114

FEI Number: 59-3694733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE.
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: PS () Delete
Name: LINN, J. MICHAEL
Address: 126 W. INT'L SPEEDWAY BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGRV (X) Delete
Name: LINN, NICOLE
Address: 126 W. INT'L SPEEDWAY BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LINN, J. MICHAEL
Address: 126 W. INT'L SPEEDWAY BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: J. MICHAEL LINN

MR

04/12/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date