

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011824

Entity Name: MAGIC BROADCASTING, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

7106 LAIRD ST.
102
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

7106 LAIRD ST.
102
PANAMA CITY BEACH, FL 32408

New Mailing Address:

FEI Number: 20-2061035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HELMS, SCOTT
2605 THOMAS DRIVE STE 150
PANAMA CITY BEACH, FL 32408 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/MANAGERS:

Title: MGR () Delete
Name: RADIO BROADCAST MANAGEMENT, INC.
Address: 7106 LAIRD ST.
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: LINDHOLM, JEFFREY
Address: 7106 LAIRD ST.
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: SEC () Change (X) Addition
Name: HELMS, SCOTT
Address: 2605 THOMAS DRIVE, STE 150
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: TREA () Change (X) Addition
Name: ALLEN, LISA
Address: 2605 THOMAS DRIVE, STE 150
City-St-Zip: PANAMA CITY BEACH, FL 32408

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SCOTT HELMS

SEC

04/14/2009

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