2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

FILED Jan 24, 2005 08:00 AM DOCUMENT # L03000033143 **Secretary of State** CONNECTICUT SCHOOL OF BROADCASTING TAMPA. LLC Principal Place of Business Mailing Address 3450 NORTHLAKE BLVD., SUITE 110 3450 NORTHLAKE BLVD., SUITE 110 PALM BEACH GARDENS, FL 33403 PALM BEACH GARDENS, FL 33403 01172005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0735405 Not Applicable \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent BANNER, DAVID DO NOT WRITE 3450 NORTHLAKE BLVD., SUITE 110 PALM BEACH GARDENS, FL 33403 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DAVID Banner (NOIL F Signature, typed or printed name of registered agent and title if applicable Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE ROBINSON, NICHOLAS H NAME. 130 BIRDSEYE ROAD STREET ADDRESS CITY-ST-ZIP FARMINGTON, CT 06032 U00000195092 01/26/05-80013-022 55.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITZE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP mle NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company of the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

OR AUTHORIZED REPRESENTATIVE