

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088485

FILED
May 08, 2008
Secretary of State

Entity Name: HERO RADIO NETWORK, LLC

Current Principal Place of Business:

476 RIVERSIDE AVENUE
JACKSONVILLE, FL 32202

New Principal Place of Business:

2451 3RD STREET SOUTH
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

476 RIVERSIDE AVENUE
JACKSONVILLE, FL 32202

New Mailing Address:

POST OFFICE BOX 50671
JACKSONVILLE BEACH, FL 32240

FEI Number: 20-5988034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BELLARD, EMORY D III
13725 WEEPING WILLOW WAY
JACKSONVILLE, FL FL US

Name and Address of New Registered Agent:

BELLARD, EMORY D III
2451 3RD STREET SOUTH
JACKSONVILLE BEACH, FL 32250 US

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: EMORY D. BELLARD III

05/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BELLARD, EMORY D III
Address: 13725 WEEPING WILLOW WAY
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BELLARD, EMORY D III
Address: 2451 3RD STREET SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: EMORY D. BELLARD III

MGRM

05/08/2008

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