
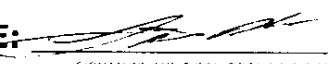


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAY -3 AM 8:25 <i>HR 5/6</i> TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000002959 AMERICAN GREYHOUND BROADCAST ASSOCIATION, L.L.C. P.O. BOX 22099 ST. PETERSBURG FL 32742-2099				1a. Principal Place of Business Address 10490 GANDY BOULEVARD ST. PETERSBURG FL 33702	
2. Principal Place of Business 10490 Gandy Boulevard Suite, Apt. #, etc.		2a. Mailing Address Suite, Apt. #, etc.		3. Date Organized or Qualified 12/02/1998	
City & State St. Petersburg, FL		City & State		3a. State of Formation FL	
Zip 33702		Country USA		4. FEI Number 59-3546352	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent HLAS, STEPHEN P 10490 GANDY BOULEVARD ST. PETERSBURG FL 33702				8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ <small>(If Registered Agent Accepting Appointment) (NOTE: Registered Agent signature is required when filing this statement.)</small>				DATE _____	
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	KORMAN, HOWARD I	4490 SOUTHSIDE BOULEVARD		JACKSONVILLE FL	
MGR	HLAS, STEPHEN P	10490 GANDY BOULEVARD		ST. PETERSBURG FL	
MGR	LAUGHLIN, ARTHUR J	1111 NORTH CONGRESS AVENUE		WEST PALM BEACH FL	
7000002871607-05/11/99-01068-016 ****188.75 ****188.75					
11. I do 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 is true and accurate and that my 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, and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE:  Stephen P. Hlas, MGR 4/30/99 (727)812-3220					