2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M0000001179

Entity Name

URBAN RADIO LICENSES, LLC*



May 02, 2005 08:00 AM Secretary of State

FILED

Principal Place of Business

Mailing Address

273 AZELEA RD., #1-308 MOBILE, AL 36609 273 AZELEA RD., #1-308 MOBILE, AL 36609



04272005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-2518493

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee_Required

5. Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC. 103 N. MERIDIAN STREET TALLAHASSEE, FL. 32301

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The above named entity submits this statement for the purpose of cha the obligations of registered agent.	nging its registered office or registered agent, or both, in the	e State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or orlinted name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DAYE
Filing Fee is \$50.00 Due by May 1, 2005		

TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	WAGNER, KEVIN 273 AZELEA RD., #1-308 MOBILE, AL 36609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

MANAGING MEMBERS/MANAGERS

1100000358640 05/04/05-80122-014 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 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:

CHTY-ST-ZIP

URE: Man Typeo on PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-28-05 Date 305.935-0002

Daytime Phone #