2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# M00000001825

Entity Name: MESA COMMUNICATIONS GROUP LLC

Current Principal Place of Business:

6400 ARLINGTON BLVD., STE. 1000
FALLS CHURCH, VA 22042

New Principal Place of Business:

Current Mailing Address:

6400 ARLINGTON BLVD., STE. 1000
FALLS CHURCH, VA 22042

New Mailing Address:

FEI Number: 58-2472023 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MEMBERS:

Title:	MGR	( ) Delete
Name:	WILLIAMS, MICHAEL T	
Address:	6400 ARLINGTON BLVD., STE. 1000	
City-St-Zip:	FALLS CHURCH, VA 22042	
Title:	MGR	( ) Delete
Name:	RUPERT, JOHN E	
Address:	612 CAREY HILL RD.	
City-St-Zip:	MONTOURSVILLE, PA 17754	
Title:	MGR	( ) Delete
Name:	SOMERS, NICHOLAS E	
Address:	540 MADISON AVE.	
City-St-Zip:	NEW YORK, NY 10022	
Title:	MGR	( ) Delete
Name:	YORT, W. MONTAGUE	
Address:	540 MADISON AVE.	
City-St-Zip:	NEW YORK, NY 10022	
Title:	MGR	( ) Delete
Name:	RHO, MATTHEW Y	
Address:	540 MADISON AVE.	
City-St-Zip:	NEW YORK, NY 10022	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL T. WILLIAMS MGR 04/13/2005

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