

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002700

FILED  
Jul 13, 2006  
Secretary of State

Entity Name: UNITED METRO MEDIA, LLC

## Current Principal Place of Business:

9000 WESSEX PLACE, STE. 202  
LOUISVILLE, KY 40222

## New Principal Place of Business:

## Current Mailing Address:

9000 WESSEX PLACE, STE. 202  
LOUISVILLE, KY 40222

## New Mailing Address:

FEI Number: 61-1378362      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:

NOLAN, JIM  
5400 S. UNIVERSITY DRIVE, SUITE 210  
FT. LAUDERDALE, FL 33328      US

## Name and Address of New Registered Agent:

NOLAN, JIM  
3201 W. COMMERCIAL BLVD., STE. 231  
FT. LAUDERDALE, FL 33309      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: JIM NOLAN

07/13/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: JOB NEWS, INC.,  
Address: 9000 WESSEX PLACE, STE. 202  
City-St-Zip: LOUISVILLE, KY 40222

Title: MGRM ( ) Delete  
Name: METRO MEDIA GROUP, L, LC  
Address: 9000 WESSEX PLACE, STE. 202  
City-St-Zip: LOUISVILLE, KY 40222

Title: MGRM ( ) Delete  
Name: MAYFAIR CAPITAL INC.,  
Address: 4969 US HWY 42 STE 2000  
City-St-Zip: LOUISVILLE, KY 40222

Title: MGRM ( ) Delete  
Name: VAN NESS, JEFFREY T  
Address: 9000 WESSEX PLACE  
City-St-Zip: LOUISVILLE, KY 40222

Title: MGRM ( ) Delete  
Name: TALBOTT, MICHAEL G  
Address: 9000 WESSEX PLACE  
City-St-Zip: LOUISVILLE, KY 40222

Title: MGRM ( ) Delete  
Name: AUBREY, THOMAS E  
Address: 9000 WESSEX PLACE  
City-St-Zip: LOUISVILLE, KY 40222

## 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:

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 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: JEFFREY VAN NESS

VP

07/13/2006

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