

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
05 JAN 31 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M01000001068

1. Entity Name
SFX BASKETBALL GROUP, LLC



Principal Place of Business
C/O SFX ENTERTAINMENT, INC.
200 WEST 42ND ST.
NEW YORK, NY 10036

Mailing Address
220 WEST 42ND ST.
NEW YORK, NY 10036

BK



01052005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|---|--------------------------------|
| 4. FEI Number 01-0568735 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Deborah D. Skipper Deborah D. Skipper 1/31/2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required for reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM SFX SPORTS GROUP, INC. 220 WEST 42ND ST. NEW YORK, NY 10036 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

700045732117

**DO NOT WRITE
IN THIS SPACE**

11. I 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 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 Dale A. Head Dale A. Head 1/25/2005 917-421-5773
Signature and typed or printed name of signing managing member, or authorized representative Date Daytime Phone #



CORPORATION SERVICE COMPANY

M01000000 1068

ACCOUNT NO. : 072100000032

REFERENCE : 172220 4375356

AUTHORIZATION :

Patricia Pigott

COST LIMIT : \$ 50.00

ORDER DATE : January 28, 2005

ORDER TIME : 11:35 AM

ORDER NO. : 172220-090

CUSTOMER NO: 4375356

CUSTOMER: Ms. Christina V. Lyng
Clear Channel Entertainment
5th Floor
220 West 42nd Street
New York, NY 10036

DK

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2005 JAN 31 AM 10:12

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

ANNUAL REPORT FILING

NAME: SFX BASKETBALL GROUP, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 2955

EXAMINER'S INITIALS: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JAN 31 PM 3:29

FILED