2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2005 08:00 AM
Secretary of State

DOCUMENT # M01000001680

1. Entity Name
NEXTMEDIA OUTDOOR, LLC

Principal Place of Business
6312 S FIDDLER'S GREEN CIRCLE
STE 360E
ENGLEWOOD, CO 80111

Mailing Address
6312 S FIDDLER'S GREEN CIRCLE
STE 360E
ENGLEWOOD, CO 80111

01042005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 84-1519700 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

U00000186041
01/21/05 00042 004 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HIRSCH, CARL E
STREET ADDRESS	6312 S FIDDLER'S GREEN CIRCLE, STE 360E
CITY-ST-ZIP	ENGLEWOOD, CO 80111
TITLE	MGR
NAME	DINETZ, STEVEN
STREET ADDRESS	6312 S FIDDLER'S GREEN CIRCLE, STE 360E
CITY-ST-ZIP	ENGLEWOOD, CO 80111
TITLE	MGRM
NAME	BAXTER, LORI
STREET ADDRESS	6312 S FIDDLER'S GREEN CIRCLE, STE 360E
CITY-ST-ZIP	ENGLEWOOD, CO 80111
TITLE	VP
NAME	STOVER, SEAN
STREET ADDRESS	6312 S FIDDLERS GREEN CIRCLE, STE 360E
CITY-ST-ZIP	ENGLEWOOD, CO 80111
TITLE	VP
NAME	HANSEN, SCHUYLER
STREET ADDRESS	6312 S FIDDLERS GREEN CIRCLE, STE 360E
CITY-ST-ZIP	ENGLEWOOD, CO 80111
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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)(l), 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: _____ 1/12/05 303-694-9118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #