

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002826

FILED
Apr 26, 2005
Secretary of State

Entity Name: BUENA VISTA DATACASTING, LLC

Current Principal Place of Business:

500 SOUTH BUENA VISTA STREET
BURBANK, CA 91521

New Principal Place of Business:

Current Mailing Address:

500 SOUTH BUENA VISTA STREET
BURBANK, CA 91521

New Mailing Address:

500 SOUTH BUENA VISTA STREET
BURBANK, CA 915210586

FEI Number: 46-0477145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JEFFREY H
1375 BUENA VISTA DRIVE, 4TH FLOOR NORTH
LAKE BUENA VISTA, FL 32830 US

Name and Address of New Registered Agent:

SMITH, JEFFREY H
1375 BUENA VISTA DRIVE
4TH FLOOR NORTH
LAKE BUENA VISTA, FL 32830 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:

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MURPHY, PETER E
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: MGR () Delete
Name: HSIEH, DANIEL S
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: MGR () Delete
Name: IZZARD, ALEXANDER E
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: MGR () Delete
Name: MEHTA, SALIL K
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: MGR () Delete
Name: THOMPSON, DAVID K
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: MGR () Delete
Name: BUETTNER, ANNE L
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: REED, MARSHA L
Address: 500 SOUTH BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

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: MARSHA L. REED

MGR

04/26/2005

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