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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

subject to a \$ 400.00 LATE FEE.

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LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee <b>\$ 188.75</b>		Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # M98000000137</b> CENTENNIAL BROADCASTING, LC 3825 FORRESTGATE DRIVE, SUITE 100 WINSTON-SALEM NC 27103 <i>94-AR CM</i>		1a. Principal Place of Business Address 3825 FORRESTGATE DRIVE, SUIT WINSTON-SALEM NC 27103	
2. Principal Place of Business 1850 43rd Ave Suite, Apt. #, etc. C-4 City & State Vero Beach, FL Zip 32960 Country USA	2a. Mailing Address 1850 43rd Ave. Suite, Apt. #, etc. C-4 City & State Vero Beach, FL Zip 32960 Country USA	3. Date Organized or Qualified 02/13/1998 4. FEI Number 56-2017365 APPLIED FOR 5. Date of Last Report	3a. State of Formation NC <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 100002837281--0 Suite, Apt. #, etc. -04/13/99--01003--017 City FL Zip Code ****188.75 ****188.75	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE _____		DATE _____	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature required when resigning)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GORDAN GRAY 1956 LIV,	100 NORTH MAIN STREET	WINSTON-SALEM NC
MGR	SHAW, ALLEN B	3825 FORRESTGATE DRIVE, SU	WINSTON-SALEM NC
MGR	WATTS, STEVEN H	3825 FORRESTGATE DRIVE, SU	WINSTON-SALEM NC
11. I do 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 annual 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, and that my name appears in Block 10, or on an attachment with an address.			
SIGNATURE: <i>Steven H. Watts</i>		Steven H. Watts 3/5/99 (336) 774-3199	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date	