

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90062 007 ****50.00

DOCUMENT # M98000000137

1. Entity Name

BEASLEY BROADCASTING OF NEVADA, LLC



Principal Place of Business

**1850 43RD AVENUE, C-4
VERO BEACH FL 32960**

Mailing Address

**C/O BEASLEY BROADCAST GROUP
3033 RIVIERA DR., STE. 200
NAPLES FL 34103**

20021594



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3033 Riviera Drive

3. Mailing Address

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.

City & State
Naples, FL

City & State

4. FEI Number **56-2017365**

Applied For
Not Applicable

Zip
34103

Country

Zip

Country

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**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
GORDAN GRAY 1956 LIVING TRUST
100 NORTH MAIN STREET
WINSTON-SALEM NC 27150** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SHAW, ALLEN B
3825 FORRESTGATE DRIVE, SUITE 100
WINSTON-SALEM NC 27103** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
WATTS, STEVEN H
3825 FORRESTGATE DRIVE, SUITE 100
WINSTON-SALEM NC 27103** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BEASLEY, GEORGE G
3033 RIVIERA DRIVE #200
NAPLES FL 34103** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BEASLEY, CAROLINE B
3033 RIVIERA DR #200
NAPLES FL 34103** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *B. Caroline Beasley* **Caroline Beasley**

01.27.03 239.263.5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)