

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 04-05 WOP

DOCUMENT # N99000000276					
1. Entity Name RADIO BROADCASTERS ALLIANCE OF TAMPA BAY, INC.					
Principal Place of Business 400 N ASHLEY DRIVE SUITE 2300 TAMPA, FL 33602			Mailing Address 400 N ASHLEY DRIVE SUITE 2300 TAMPA, FL 33602		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3545317	
				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BRANNOCK, STEVEN L HOLLAND & KNIGHT LLP 400 N ASHLEY STREET TAMPA, FL 33602			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 NUMBER FEE IS \$297.50				State check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHERRY, GLEN C/O WTMP 5207 WASHINGTON BLVD. TAMPA, FL 33619 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NANCY CATHARIUS 404 W. Lime Street LAKELAND, FL 33815 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD REINHART, DAVE C/O CLEAR CHANNEL COMM, 4002-A GANDY BLVD. TAMPA, FL 33611 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARC L. VILA 5203 Armenia Ave. TAMPA, FL 33603 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TURNER, CHRIS C/O WTN 504 N. REO STREET TAMPA, FL 33609 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MEYER, TEX C/O WLCC/WMG 1915 N. DALE MABRY HWY. 200 TAMPA, FL 33607 ☒ Delete	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			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Chris Turner</u> Chris Turner July 5, 2005 813-416-7386					