

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90987 009 ***158.75

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1. Entity Name

RICHLAND TOWERS - BROADCAST, INC.



Principal Place of Business

**4890 W. KENNEDY BLVD., STE. 850
TAMPA FL 33609**

Mailing Address

**4890 W. KENNEDY BLVD., STE. 850
TAMPA FL 33609**

2. Principal Place of Business

**4890 West Kennedy Blvd.
Suite 920
Tampa, FL 33609-1863**

3. Mailing Address

**4890 West Kennedy Blvd.
Suite 920
Tampa, FL 33609-1863**

11022371



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3700103**

Applied For
Not Applicable

Zip

Country

USA

Zip

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEST, DALE A
4890 W. KENNEDY BLVD., STE. 850
TAMPA FL 33609**

7. Name and Address of New Registered Agent

Name
F&L CORP.
Street Address
**THE GREENLEAF BUILDING
200 LAURA STREET, 3RD FLOOR
JACKSONVILLE, FL 32202-3510**
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.

F&L Corp

By: **R.J. Wolfe, V.P.** 4/28/03

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NO)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BRAY, JACK H**
STREET ADDRESS **4890 W. KENNEDY BLVD., STE. 850**
CITY-ST-ZIP **TAMPA FL 33609**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP** ☒ Change ☐ Addition
NAME **John H. Bray**
STREET ADDRESS **4890 W. Kennedy Blvd., Ste. 920**
CITY-ST-ZIP **Tampa, FL 33609-1863**

TITLE **VP** ☐ Change ☒ Addition
NAME **Dale A. West**
STREET ADDRESS **4890 W. Kennedy Blvd., Ste. 920**
CITY-ST-ZIP **Tampa, FL 33609-1863**

TITLE ☐ Change ☒ Addition
NAME **Vice President/Secretary**
STREET ADDRESS **Matthew J. Bray**
CITY-ST-ZIP **4890 W. Kennedy Blvd, Ste. 920
Tampa, FL 33609-1863**

TITLE ☐ Change ☒ Addition
NAME **V**
STREET ADDRESS **James N. Lamar**
CITY-ST-ZIP **4890 W. Kennedy Blvd., Ste. 920
Tampa, FL 33609-1863**

TITLE ☐ Change ☒ Addition
NAME **V**
STREET ADDRESS **J. Curt Wilkinson**
CITY-ST-ZIP **4890 W. Kennedy Blvd., Ste. 920
Tampa, FL 33609-1863**

TITLE ☐ Change ☒ Addition
NAME **Assistant VP/Assistant Secretary**
STREET ADDRESS **Dawn M. Lemons**
CITY-ST-ZIP **4890 W. Kennedy Blvd., Ste. 920
Tampa, FL 33609-1863**

12. 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 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 607, 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:

Dawn M. Lemons, Asst VP

4-25-03 (813) 286-4146

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)