## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 09, 2001 8:00 am **DOCUMENT # P20962 Secretary of State** BEASLEY BROADCASTING MANAGEMENT CORPORATION 03-09-2001 90478 030 \*\*\*150.00 Principal Place of Business Mailing Address 3033 RIVIERA DRIVE 3033 RIVIERA DRIVE SUITE 200 SUITE 200 KUUJUJAI NAPLES FL 34103 NAPLES FL 34103 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 56-1294792 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Delete TITLE ☐ Change BEASLEY, GEORGE G. NAME NAME 3033 RIVIERA DR #200 STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-7IP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition BEASLEY, CAROLINE NAME NAME 3033 RIVIERA DRIVE #200 STREET ADDRESS STREET ADDRESS CITY-ST-7IP NAPLES FL CITY-ST-7(P Addition ☐ Change TITLE Delete TITLE BEASLEY, SHIRLEY ANN NAME NAME STREET ADDRESS 3033 RIVIERA DRIVE #200 STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Chance TITLE ☐ Delete TITLE BEASLEY, BRAIN NAME NAME 3033 RIVIERA DRIVE #200 STREET ADDRESS STREET ADDRESS CITY-ST-709 NAPLES FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BEASLEY, BRUCE G NAME NAME 3033 RIVIERA DRIVE #200 STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-7iP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

3-601

741-263-5000

Daytime Phone #

FILED