FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

RINTED NAME OF SIGNING

SIGNATURE

Mar 21, 2001 8:00 am DOCUMENT # P92000014109 **Secretary of State** 1. Entity Name CITY BROADCASTING CO., INC. 03-21-2001 90040 007 ***150.00 Principal Place of Business Mailing Address 2222 NORTH RIVERSIDE DRIVE 2222 NORTH RIVERSIDE DRIVE 935794 INDIATLANTIC FL 32903 INDIATLANTIC FL 32903 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3156139 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 Name FRANCO, DAVID P Street Address (P.O. Box Number is Not Acceptable) 2222 NORTH RIVERSIDE DRIVE INDIATLANTIC FL 32903 City Zip Code FL 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME FRANCO, DAVID P NAME STREET ADDRESS STREET ADDRESS 2222 NORTH RIVERSIDE DRIVE CITY-ST-ZIP CITY-ST-ZIP INDIATLANTIC FL 32903 ☐ Delete ☐ Addition TITLE ☐ Change TITLE FRANCO, FRANK A NAME NAME STREET ADDRESS STREET ADDRESS 1425 OLD MILL RD. CITY-ST-ZIP CITY-ST-7IP WYOMISSING PA 19610 Delete [-]-Addition TITLE TITLE T1-Change Franco, Eileen M. NAME NAME 2222 North Riverside Drive STREET ADDRESS STREET ADDRESS Indialantic, FL 32903 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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