

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 09, 1999 8:00 am  
Secretary of State

04-09-1999 90075 023 \*\*\*158.75

DOCUMENT # P97000014113

1. Corporation Name

METROPOLITAN RADIO GROUP OF FLORIDA, INC.

Principal Place of Business

2101 HAMMOCK PLACE  
SARASOTA FL 34235

Mailing Address

2101 HAMMOCK PLACE  
SARASOTA FL 34235

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1997

4. FEI Number

APPLIED FOR 43-1746464

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.



Yes



No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GODDARD, FRANK W  
2959 FIRST AVE., NORTH  
ST. PETERSBURG FL 33713

81 Name

CRAFT, T. MICHAEL

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

2101 HAMMOCK PLACE

83

84 City

SARASOTA

FL

85

Zip Code

34235

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*T. Michael Craft* T. MICHAEL CRAFT SEC/TREAS

23 MAR. 1999

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME ACKER, GARY L  
STREET ADDRESS 3801 SKILLERN BLVD.  
CITY-ST-ZIP FLOWER MOUND TX 75028

1.1 TITLE DP ☐ Change ☒ Addition  
1.2 NAME ~~MARK L.~~ ACKER, MARK L.  
1.3 STREET ADDRESS 1549 GREENBRIDGE  
1.4 CITY-ST-ZIP OZARK, MO 65721

TITLE DST ☐ DELETE  
NAME CRAFT, T. MICHAEL  
STREET ADDRESS 2101 HAMMOCK PLACE  
CITY-ST-ZIP SARASOTA FL 34235

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE DP ☒ DELETE  
NAME DAVIS, JAMES G JR.  
STREET ADDRESS 1112 SIXTH STREET  
CITY-ST-ZIP BRADENTON FL 34208

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*T. Michael Craft* T. MICHAEL CRAFT  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23 MAR. 1999

Date

941.954.1280

Daytime Phone #

0483108

CR2E034 (11/98)