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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

P97000057375 (2) DOCUMENT

SOUTHEAST RADIO COMPANY, INC.

Principal Place of Business Mailing Address 1301 RIVERPLACE BOULEVARD 1301 RIVERPLACE BOULEVARD **SUITE 1301 \$UITE 1301** DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 3. Date Incorporated or Qualified 07/01/1997 4. FEI Number 2a. Mailing Address Applied For Principal Place of Business 65-076893 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution Added to Fees 28 23 Zip Country Zιο Country 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. Yes 24 25 29 30 Name and Address of New Registered Agent Name and Address of Current Registered Agent MOTOLAW, INC. 1301 RIVERPLACE BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1301** 83 JACKSONVILLE FL 32207 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Horida 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 Horida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505. Horida Statutes. SIGNATURE (NOTE Rugistered Apent signature required when reinstating) Signature, typed or punited name of responsed agent and little if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12, Change Addition DEFETE 1111111 TITLE MARTIN, JAMES E JR 1.2 NAME NAME **4810 DELTONA DRIVE** 1.3 STREET ADDRESS STREET ADDRESS PUNTA GORDA FL 33950 14 CITY - ST - ZIP CITY-ST-ZIP Change DELETE TITLE 21 TITLE Paticias Dahlin 2.2 NAME NAME 4030 BLY PASS LANC 2 3 STREET ADDRESS STREET ADDRESS Punta Gorda FC 33955 2 4 GHY-ST-7IP CITY-ST-ZIP Change coitibbA DELETE TITLE 3 1 THEF 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CHY+\$1 - ZIP CITY-ST-ZIP DELETE Change Addition 41 THEF TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY- ST- ZIP CITY-ST-ZIP Change ___ Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

14. Thereby 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 early; 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 chaloged\text{\text{or on an attachment with an address.}} V

FILED

Apr 14 1998 8:00am

Secretary of State