


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90115 049 ***158.75

DOCUMENT # S10379 1. Entity Name ZGS BROADCASTING OF TAMPA, INC.					
Principal Place of Business 402 REO STREET 218 TAMPA, FL 33609			Mailing Address 2000 N 14TH ST STE 400 ARLINGTON, VA 22201		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3051422	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent ZAVALA, EDUARDO A 402 REO STREET 218 TAMPA, FL 33609				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				\$8.75 Additional Fee Required	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GORDON, RONALD J 4101 LITTLE FALLS ROAD ARLINGTON, VA 22207	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ZAVALA, EDUARDO A 200 WEST GREENWAY BOULEVARD FALLS CHURCH, VA 22046	<input type="checkbox"/> Delete			
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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: <i>Erica Johnson</i> ERICKA JOHNSON SECRETARY 2-7-05 703-528-5656					
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					

50049652



02072005 Chg-P CR2E034 (10/03)

4. FEI Number
59-3051422

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

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DP

GORDON, RONALD J

4101 LITTLE FALLS ROAD

ARLINGTON, VA 22207

☐ Delete

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NAME

STREET ADDRESS

CITY-ST-ZIP

V

ZAVALA, EDUARDO A

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FALLS CHURCH, VA 22046

☐ Delete

TITLE

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SIGNATURE: *Erica Johnson* ERICKA JOHNSON SECRETARY 2-7-05 703-528-5656

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #