## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address

SIGNATURE:

## Feb 09, 2004 8:00 am **Secretary of State DOCUMENT # V10416** 02-09-2004 90035 040 \*\*\*150.00 1. Entity Name ORBA, INC. Principal Place of Business Mailing Address んせいひひひひひ 2500 MAITLAND CENTER PARKWAY 170 W. FAIRBANKS AVE., STE. 200 4TH FLOOR, STE., 401 WINTER PARK, FL 32789 MAITLAND, FL 32751 2. Principal Place of Business 3. Mailing Address 4192 John Young Parkway Suite, Apt. #, etc. Suite, Apt. #, etc. 01072004 Chg-P CR2E034 (10/03) City & State City & State 4. FFI Number Applied For Orlando, Florida 59-3104148 Not Applicable Zip Country 7in Country \$8.75 Additional 32804 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Bill Hendrich BYRD, LINDA % CLEAR CHANNEL COMMUNICATIONS Street Address (P.O. Box Number is Not Acceptable) Cox Radio, Inc. 2500 MAITLAND CTR. PKWY., 4TH FL, STE. 401 MAITLAND, FL 32751 4192 John Young Parkway 32804 Orlando 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \_\_\_\_\_\$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DP TITI F Defete DP TITLE XX Change ☐ Addition ?TAME BYRD, LINDA NAME Bill Hendrich STREET ADDRESS 2500 MAITLAND CTR PKWY, 4TH FL, STE. 401 STREET ADDRESS 4192 John Young Parkway CITY-ST-ZIP MAITLAND, FL 32751 CITY-ST-ZIP Orlando, FL 32804 DV TIEVÉ Delete TITLE M Change ☐ Addition NAME REESE, RICH NAME Linda Byrd STREET ADDRESS 4192 JOHN YOUNG PARKWAY STREET ADDRESS 2500 Maitland Ctr. PKWY, 4th FL, Ste401 CITY-ST-ZIP ORLANDO, FL 32804 CITY-ST-ZIP Maitland, FL 32751 TITLE Delete TITLE DS Change Change ☐ Addition SMITH, ROBIN NAME NAME Earnest James STREET ADDRESS 1800 PEMBROOK DRIVE, STE, 400 STREET ADDRESS 1800 Pembrook Drive, Suite 400 Orlando, FL 32810 CITY-ST-7IP ORLANDO, FL 32810 CITY-ST-7tP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME WEINKAUF, RICK NAME STREET ADDRESS 170 W. FAIRBANKS AVE., STE. 200 STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

**FILED**