2001 UNIFORM BUSINESS REPORT (UBR)

Jul 05, 2001 8:00 am **Secretary of State DOCUMENT # V43803** 1. Entity Name 07-05-2001 90005 030 ***550.00 RADIO BREVARD, INC. Principal Place of Business Mailing Address HWY 46 MIMS, FL. 32754 A0075821 2. Principal Place of Business 3. Mailing Address 1225 Garden St. 1225 Garden St. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number Titusville, Florida Titusville, Florida Not Applicable 59-3127918 ^{Zi}32796 Country Brevard ^{₹in}2796 \$8.75 Additional Country Brevard 5. Certificate of Status Desired Fee Required - 6. Name and Address of Current Registered Agent -7.-Name.and Address of New Registered Agent -Edgar. E. Sego, President FREY, JULIA L Street Address (P.O. Box Number is Not Acceptable) LOWNDES, DROSDICK ET AL 1510 Riverside Drive 215 N EOLA DRIVE City Titusville FL. 32801 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. EDGAR EUGENE SEGO, PRESIDENT 06-15-01 (NOTE: Registered Agent signature required when reinstating) e it applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 12. Change Addition TITLE □ Delete TITLE P/T/S P/T/S NAME NAME Edgar: Eugene Sego 1510 Riverside Dr. Titusville, Florida Edgar Eugene Sego STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 1510 Riverside Dr. Titusville 32780 TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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EDGAR EUGENE SEGO, **SIGNATURI** (321)264-2475

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

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