**FILED** 

Apr 26, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # V67365**

1. Corporation Name

PERSONAL RADIO, INC.

ARTHUR, JEFF

SUITE E

4900 CREEKSIDE DRIVE

CLEARWATER FL 34620

TENOGRAE TRIBIO, TRIB				
Principal Flace of Business	Mailing Address	A 1861 Bristo Billi (Sand ilite Anni) bill artin albu artin dian artin artin		
4900 CREEKSIDE DR. STE. #E	4900 Creekside dr. Ste. #E Clearwater Fl. 34620	DO NOT WRITE IN THIS SPACE		
CLEARWATER FL 34620	CLEARWAIEN FL 3402U	3. Date incorporated or Qualifed 09/29/1992		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For		
21	26	NOT APPLICABLE Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired S8.75 Additional Fee Required		
City & 5 tate	City & State	6. Electic n Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country	Zip Country	8. This corporation owes the current year Intangible		
24 25	29 30	Personal Property Tax. Yes No		
<ol><li>Name and Adcress of C</li></ol>	urrent Registered Agent 81 Nam	10. Name and Address of New Registered Agent		

11. Pursuant to the provisions of Scictions 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 boin, 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.

83

City

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

ayent. ra	in lamiliar with, and accept the obligations of, decision our society, i in	on Otalaica.		
SIGNATURE	Signature, typed or printed naine of registered agent and title if applicable (NOT:::	Registered Agent signature require	d when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	OF S IN 12
TITLE	PTD DELETE	1.1 TITLE	☐ Change	
NAME	ARTHUR, JEFF	1.2 NAME		
STREET ADDRESS	4900 CREEKSIDE DR., STE E	1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL	1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	2.1 TITLE	Change	Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		,
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	☐ Change	☐ Addition
NAME		32 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	Change	☐ Addition
NAME		4.2 NAME		'
STREET ADDRESS		4.3 STREET ADDRESS		i
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	Change	Addition
NAME		52 NAME		
STREET ADDRES		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE	☐ Change	Addition
NAME		6.2 NAME		l
STREET ADDRES:		6.3 STREET ADDRESS		
CITY, ST. 7IP		6.4 CITY-ST-ZIP		

14. Thereby certify that the information supplied with his 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:

Jeff Arthur

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/99

*(*(727)573-5277

Zip Code