

**2017 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M01000001984

**Entity Name:** UNIVISION RADIO FLORIDA, LLC

**Current Principal Place of Business:**

500 FRANK W BURR BLVD  
TEANECK, NJ 07666

**Current Mailing Address:**

500 FRANK W BURR BLVD  
TEANECK, NJ 07666 US

**FEI Number:** 95-4455121

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name UNIVISION RADIO LLC  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title CHIEF EXECUTIVE OFFICER & PRESIDENT  
Name FALCO, RANDY  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EVP, SECRETARY AND DIRECTOR  
Name SCHWARTZ, JONATHAN  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EVP, CFO AND DIRECTOR  
Name LOPEZ-BALBOA, FRANK J.  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EVP AND CHIEF HUMAN RESOURCES OFFICER  
Name LAZO, MARGARET  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EVP - FINANCE, DEPUTY CHIEF FINANCIAL OFFICER & CHIEF ACCOUNTING OFFICER  
Name LORI, PETER  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EVP, TREASURER AND CHIEF TAX OFFICER  
Name MCCANN, SHAWN  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title ASSISTANT SECRETARY  
Name GRANT, JAY R.  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN PAUL ACEVES

**ASSISTANT SECRETARY** 09/29/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title ASSISTANT SECRETARY  
Name ACEVES, JOHN PAUL  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title ASSISTANT SECRETARY  
Name MERCEDES, RAMON  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title DIRECTOR  
Name LORI, PETER H.  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666