


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90052 024 \*\*\*150.00

DOCUMENT # F0100002760							
1. Entity Name SOUTH TEXAS BROADCASTING, INC.							
Principal Place of Business 4880 SANTA ROSA ROAD CAMARILLO, CA 93012			Mailing Address 4880 SANTA ROSA ROAD CAMARILLO, CA 93012				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		4. FEI Number 77-0388924			
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
			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 _____ DATE _____							
SIGNATURE (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when withdrawing)							
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	C	<input type="checkbox"/> Delete	TITLE	CEOP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	EPPERSON, STUART W		NAME	Atsinger, Edward G. III			
STREET ADDRESS	3780 WILL SCARLET RD		STREET ADDRESS	4880 Santa Rosa Road			
CITY- ST- ZIP	WINSTON-SALEM, NC 27104		CITY- ST- ZIP	Camorillo, CA 93012			
TITLE	DP	<input type="checkbox"/> Delete	TITLE	COOD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ASTIRGEN, EDWARD G III		NAME	Halvovson, Eric H.			
STREET ADDRESS	4880 SANTA ROSA RD		STREET ADDRESS	4880 Santa Rosa Road			
CITY- ST- ZIP	CAMARILLO, CA 93012		CITY- ST- ZIP	Camorillo, CA 93012			
TITLE	EVT	<input type="checkbox"/> Delete	TITLE	VS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	EVANS, DAVID A		NAME	Henderson, Christopher J.			
STREET ADDRESS	4880 SANTA ROSA RD		STREET ADDRESS	4880 Santa Rosa Road			
CITY- ST- ZIP	CAMARILLO, CA 93012		CITY- ST- ZIP	Camorillo, CA 93012			
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HILL, EILEEN E		NAME				
STREET ADDRESS	4880 SANTA ROSA RD		STREET ADDRESS				
CITY- ST- ZIP	CAMARILLO, CA 93012		CITY- ST- ZIP				
TITLE	VSD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BLOCK, JONATHAN L		NAME				
STREET ADDRESS	4880 SANTA ROSA RD		STREET ADDRESS				
CITY- ST- ZIP	CAMARILLO, CA 93012		CITY- ST- ZIP				
TITLE	EV	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DAVIS, JOE		NAME				
STREET ADDRESS	4880 SANTA ROSA RD		STREET ADDRESS				
CITY- ST- ZIP	CAMARILLO, CA 93012		CITY- ST- ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____		Christopher J. Henderson 4/3/08 (205) 987-0400 Date: _____ Disting. Phone # _____					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							

**ATTACHMENT**  
**SOUTH TEXAS BROADCASTING, INC.**

**DIRECTORS AND OFFICERS**  
(as of 3/1/08)

**DIRECTORS:**

**Edward G. Atsinger III**  
4880 Santa Rosa Road  
Camarillo, CA 93012

40073503  
#FO100002760

**Eric H. Halvorson**  
4880 Santa Rosa Road  
Camarillo, CA 93012

**OFFICERS OF THE CORPORATION**

**Stuart W. Epperson**, Chairman of the Board  
3780 Will Scarlet Road  
Winston-Salem, NC 27104

**Edward G. Atsinger III**, Chief Executive Officer and President  
4880 Santa Rosa Road  
Camarillo, CA 93012

**Eric H. Halvorson**, Chief Operating Officer  
4880 Santa Rosa Road  
Camarillo, CA 93012

**Joe D. Davis**, Executive Vice President  
4880 Santa Rosa Road  
Camarillo, CA 93012

**David A. R. Evans**, Executive Vice President-Business Development and Chief Financial Officer  
4880 Santa Rosa Road  
Camarillo, CA 93012

**Evan D. Masyr**, Vice President – Accounting & Finance  
4880 Santa Rosa Road  
Camarillo, CA 93012

**Christopher J. Henderson**, Vice President and Secretary  
4880 Santa Rosa Road  
Camarillo, CA 93012