## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **P97000097765** Mar 01, 2000 8:00 am **Secretary of State** PAXSON SYRACUSE LICENSE, INC. 03-01-2000 90087 001 26,250.00 Mailing Address Principal Place of Business **601 CLEARWATER PARK ROAD** 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401-6233 WEST PALM BEACH FL 33401 10100 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0795915 Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WATSON, WILLIAM L ESQ Street Address (P.O. Box Number is Not Acceptable) 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401 City Zip Code FL 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Change DC TITLE Delete TITLE PAXSON, LOWELL W NAME NAME **601 CLEARWATER PARK ROAD** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401-6233 ☐ Change ☐ Addition Delete TITLE TITLE Sagansky, Jeff BACOCK, JAMES B NAME NAME 601 Clearwater Park Road STREET ADDRESS **601 CLEARWATER PARK RD** STREET ADDRESS 33401-6233 CITY-ST-ZIP West Palm Beach, Florida CITY-ST-ZIP WPB FL 33401-6233 ∠ Change Addition □ Delete TITLE TITLE Grossman, Seth A. TEK. ARTHUR D NAME NAME 601 Clearwater Park Road **601 CLEARWATER PARK RD** STREET ADDRESS STREET ADDRESS 33401-6233 CITY-ST-ZIP West Palm Beach, Florida WPB FL 33401-6233 CITY-ST-ZIP Change ☐ Addition VPAS TITLE Delete TITLE MORRISON, ANTHONY L NAME NAME **601 CLEARWATER PARK RD** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WPB FL 33416 ☐ Change ☐ Addition Delete TITLE TITLE GAMACHE, KENNETH M NAME NAME STREET ADDRESS 601 CLEARWATER PARK RD STREET ADDRESS WPB FL 33401-6233 CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE WATSON. WILLIAM, L NAME NAME STREET ADDRESS **601 CLEARWATER PARK RD** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WPB FL 33416

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 accuracy, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William L. Watson, Secretary 561-659-4122

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Daytime Phone #