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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000028638

1. Corporation Name

PAXSON COMMUNICATIONS OF SAN ANTONIO-26, INC.

| Principal Place of Business | Mailing Address |
|--|--|
| 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401 | 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401 |

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90063 026 ***150.00

| Principal Place | e of Business | Mailing Address | | | | | | | |
|--|---|--|------------------------|-------------|--------------|---|----------------|---------|----------------|
| 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401 | | 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401 | | DO NOT WRIT | re in This (| SDACE | | | |
| | | | | | | 3. Date Incorporated or Qualifed 03/27/1998 | L III III C | A AOL | |
| 1 Principal P | lace of Business | 2a. Mailing Address | | | | 4. FEI Number | | | Applied For . |
| | lace of Business | 26 | | | | 65-0826035 | | | Not Applicable |
| Suite, Apt. | # etc | Suite, Apt. #, etc. | | | | | | | Additional |
| 22 | <i>"</i> , 500. | 27 | | | | 5. Certificate of Status Desired | | Fee | Required |
| City & Stat | 8 | City & State | | | | 6, Election Campaign Financing | | \$5.0 | 0 May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | • | d to Fees |
| Zip | Country | Zip | Countr | у | | 8. This corporation owes the curr | ent year Intai | ngible | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax. | | X Yes | □No |
| 531 | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New F | egistered A | gent | |
| | | | 8 | 1 Na | me | | | | • |
| | SON, WILLIAM L ESQ. | | 8: | 2 Ste | oot Addre | ess (P.O. Box Number is Not Accepta | (ble) | | |
| | CLEARWATER PARK ROAD | | 0, | . 3" | cei Addie | 555 (F.O. BOX Humber to Not Adoopte | 0.07 | | |
| WES | ST PALM BEACH FL 33401 | | 8: | 3 | | | | | |
| | | | L | | | | | Tan 7: | - C-do |
| | | | 8 | 4 Cit | , | | FL | 85 Zi | p Code |
| SIGNATURE | Signature, typed or printed name of registered agent OFFICERS AND | DIRECTORS | 13. | | | when reinstating) ADDITIONS/CHANGES TO OF | FICERS AND | | |
| TITLE | Ď | ☐ DELETE | 1.1 TITLE | | < r | ee attached | | Chang | e |
| NAME | PAXSON, LOWELL W | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 601 CLEARWATER PARK ROAD | ļ | 1.3 STRE | ET ADDR | ESS | | | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33401 | | 1.4 CITY- | ST-ZIP | | | | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | | | | ☐ Chang | e Addition |
| NAME | | | 2.2 NAME | 1 | | | | | |
| STREET ADDRESS | | | 2.3 STRE | ET ADDR | ESS | | | | ļ |
| CITY-ST-ZIP | | | 2. 4 CITY | -ST-ZIP | | | | | 7. |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | | | ☐ Chang | e Addition |
| NAME | | | 32 NAME | | ļ | • | | | |
| STREET ADDRESS | | | 3.3 STRE | ET ADDA | ESS | | | | |
| CITY-ST-ZIP | | | 3.4, CITY | | | | | | - Addition |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | | | Chang | ge Addition |
| NAME | | | 4. 2 NAM | E | | | | | |
| STREET ADDRESS | | | 4.3 STRE | ET ADDR | ESS | • | | | |
| CITY-ST-ZIP | | | 4.4 CITY- | | _ | | | · Char | e Addition |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | | | Chang | ge L Addition |
| NAME | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 5.3 STRE | | ESS | | | | |
| CITY-ST-ZIP | | —————————————————————————————————————— | 5.4 CITY- 6.1 TITLE | | _ | | | ☐ Chang | e Addition |
| TITLE | | ☐ DELETE | | | | | | ☐ chang | le Nagarou |
| NAME | Į. | | 6.2 NAME | | F66 | | | | |
| STREET ADDRESS | d . | | 6.3 STRE | C I AUUh | EQQ | · · | | | |

CITY-ST-ZIP 14. 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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

232392-90063-26 P98000028638

Attachment

13. Additions/Changes To Officers And Directors In 12

Title:

D/C

Name:

Paxson, Lowell, W

Street Address:

601 Clearwater Park Road

City-St-Zip:

West Palm Beach, FL 33401

Title:

Ρ

Name:

Bocock, James

Street Address:

601 Clearwater Park Road

City-St-Zip:

West Palm Beach, FL 33401

Title:

T/VP

Name:

Tek, Arthur

Street Address:

601 Clearwater Park Road

City-St-Zip:

West Palm Beach, FL 33401

Title:

S

Name:

Watson, William L.

Street Address:

601 Clearwater Park Road

City-St-Zip:

West Palm Beach, FL 33401

Title:

VP/AS

Name:

Morrison, Anthony L.

Street Address:

601 Clearwater Park Road

City-St-Zip:

West Palm Beach, FL 33401

Title:

VP

Name:

Gamache, Kenneth

Street Address:

601 Clearwater Park Road

City-St-Zip:

West Palm Beach, FL 33401