

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

FILED  
Feb 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000023982 (7)  
1. Corporation Name  
PAXSON COMMUNICATIONS OF GREENSBORO-16, INC.



Principal Place of Business  
601 CLEARWATER PARK ROAD  
WEST PALM BEACH FL 33401

Mailing Address  
601 CLEARWATER PARK ROAD  
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
03/18/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		65-0653894		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		Yes No	

9. Name and Address of Current Registered Agent

WATSON, WILLIAM L.  
601 CLEARWATER PARK ROAD  
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

FL

11. Pursuant to the provisions of Sections 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 both, 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 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	
NAME	PAXSON, LOWELL W	1.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	
NAME	BOCOCK, JAMES B.	2.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VPT	3.1 TITLE	
NAME	TEK, ARTHUR D.	3.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	VPAS	4.1 TITLE	
NAME	MORRISON, ANTHONY L.	4.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	
NAME	WATSON, WILLIAM L.	5.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Vice President
NAME		6.2 NAME	Kenneth M. Gamache
STREET ADDRESS		6.3 STREET ADDRESS	601 Clearwater Park Road
CITY-ST-ZIP		6.4 CITY-ST-ZIP	West Palm Beach, Florida 33401-6233

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.

SIGNATURE

CR2E034 (10/97)