

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90124 007 \*\*\*150.00

**DOCUMENT # 506430**

1. Entity Name

WESTGATE TV INC.



Principal Place of Business

125 S PALMETTO AVE  
DAYTONA BEACH FL 32114  
US

Mailing Address

PO BOX 9308  
DAYTONA BCH FL 32120  
US

2. Principal Place of Business

3. Mailing Address

440-B Pentress Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Daytona Beach, FL

Zip

Country

Zip

Country

32114 USA

4. FEI Number

59-1679619

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UPCHURCH, PAUL N.  
125 S PALMETTO AVE  
DAYTONA BEACH FL 32114

Name

PAUL N. Upchurch

Street Address (P.O. Box Number is Not Acceptable)

440-B Pentress Blvd

City

Daytona Beach

FL

Zip Code

32114

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D.	<input type="checkbox"/> Delete
NAME	OGLE, BILL C SR	
STREET ADDRESS	125 S PALMETTO AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	P	<input type="checkbox"/> Delete
NAME	UPCHURCH, PAUL N.	
STREET ADDRESS	125 S PALMETTO AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	S	<input type="checkbox"/> Delete
NAME	TILLOTSON, MARGO M.	
STREET ADDRESS	125 S PALMETTO AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	440-B Pentress Blvd.	
CITY-ST-ZIP	Daytona Bch, FL 32114	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	440-B Pentress Blvd	
CITY-ST-ZIP	Daytona Bch, FL 32114	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	440-B Pentress Blvd	
CITY-ST-ZIP	Daytona Bch, FL 32114	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARGO M. Tillotson 4-15-03 386-226-4054

Date

Daytime Phone #

CR2E034 (10/02)