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(Re	equestor's Name)	
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PICK-UP	TIAW	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	

Office Use Only



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03/09/06--01055--009 **70.00

08/27/06--01015--006 **: (50.00

TAX FORM FILING INSTRUCTIONS

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA FORM CR2E007

Prepared for	PAXSON MANAGEMENT CORPORATION 529 SOUTH FLAGLER DRIVE, #26-H WEST PALM BEACH, FL 33401
Prepared by	BDO SEIDMAN, LLP CERTIFIED PUBLIC ACCOUNTANTS 1601 FORUM PLACE, SUITE 904 WEST PALM BEACH, FL 33401
To be signed and dated by	THE APPROPRIATE CORPORATE OFFICER(S)
Amount of Fee	\$70.00
Make check payable to	FLORIDA DEPARTMENT OF STATE
Mail form And check (if applicable) to	DIVISION OF CORPORATIONS P. O. BOX 6327 TALLAHASSEE, FL 32314
Special Instructions	ATTACH AN ORIGINAL OF A CERTIFICATE OF EXISTENCE OR GOOD STANDING THAT HAS BEEN CERTIFIED WITHIN THE LAST 90 DAYS. THE REGISTERED AGENT MUST SIGN ON BEHALF OF THE COMPANY. WE RECOMMEND THAT YOU USE CERTIFIED MAIL WITH POSTMARKED RECEIPTS FOR PROOF OF TIMELY FILING.

COVER LETTER

	stration Section ion of Corporations							
SUBJECT:	Paxson Manage			ust include suffix)				
Dear Sir or I	Madam:							
"Certificate				ation to Transact Bu the above reference				ì
Please retu	rn all corresponden	ce concerning this	matter to th	e following:				
Lowell W.	Paxson		_					
		(1)	lame of Perso	n)				
Paxson Ma	nagement Corpo	ration						
			Firm/Compan	y)				
529 South	Flagler Drive	# 26 u				,		
<u> </u>	Flagier Dire	, # 20-11	(Address)				ro	
						<u> </u>	0	L
West Palm	Beach, FL 33	401 (City/)	State and Zip	code)	- 5	-		Or LTO
		Const	stato and Esp	0000,	į.	r	27	fam.m
					:	; -	79	
For further i	nformation concern	ing this matter, ple	ase call:		⊆		ιö	6-1
					Ê	in	5	
Lowell W.		at	561-835-				<u></u>	
	(Name of Person)		(Area	Code & Daytime Tele	phone Num	iber)		
Registration Division of C Clifton Build 2661 Execu Tallahassee	orporations ing tive Center Circle , FL 32301			MAILING ADDRES Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 3	on rations			
Enclosed is	a check for the follo	wing amount:						
≭ \$70.00 F	filing Fee	\$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy		Certif		ng Fee, of Status & opy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

"COMPANY," "CORPORATION,"		
and the second s	reiness in Filand	
ame adopted for the purpose of transacting b	iusiness in Fiondi	
3. 20-3542618	h/a)	
(FE) number, it applicat	ole}	
5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")		
in Florida. if prior to registration)		
02, F.S., to determine penalty liability)		
		
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r country to be carried out in state of Florida)		
O. P NOT	S 5	
O. Box <u>NO1</u> acceptable)	DA IS	
		
, Florida 33324		
	ame adopted for the purpose of transacting b 3. 20-3542618 (FEI number, if application) 5. Perpetual (Duration: Year corp. will cease to exist prior to registration) 10. F.S., to determine penalty liability) Tice address)	

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

•				
A.	DIR	EC.	TOR	S

Chairman:Lowell W. Paxson				
Address: 529 South Flagler Drive, # 26-H				
West Palm Beach, FL 33401				
Vice Chairman:				
Address:				
Director:				
Address:				
Director:				
Address:				
B. OFFICERS				
B. OFFICERS	VLL 8			
President:Lowell W. Paxson	5			
Address: 529 South Flagler Drive, # 26-H				
West Palm Beach, FL 33401				
Vice President:	0 2			
Address:	ro			
Secretary Marla J. Paxson, Assistant Secretary				
Address: 529 South Flagler Drive, # 26-H, West Palm Beach, FL 3346	01			
Treasurer:				
Address:				
NOTE: If necessary, you may attach an addendum to the application listing additional officers are	nd/or directors.			
13. Jaulla Varen				
(Signature of Director or Officer listed in number 12 of the application	(חכ			
14. Lowell W. Paxson, President (Typed or printed name and capacity of person signing application)				

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, PAXSON MANAGEMENT CORPORATION, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 15, 2005, and is in good standing in this state.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 25, 2006.

DEAN HELLER

Secretary of State

Certification Clerk