

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2004 8:00 am
Secretary of State

03-23-2004 90001 016 ***150.00

DOCUMENT # F96000004601

1. Entity Name
SOUTH FLORIDA TELEVISION INC.



Principal Place of Business
**3499 NW 53RD ST
FORT LAUDERDALE, FL 33309**

Mailing Address
**1155 PEACHTREE STREET, NE
SUITE 1800
ATLANTA, GA 30309-3610**

54021176



2. Principal Place of Business
754 Peachtree Street, NE

Suite, Apt. #, etc.
Suite D1481

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip
Country

01072004 Chg-P CR2E034 (10/03)

City & State
Atlanta, GA 30308-1206

Zip
Country

4. FEI Number
13-3774229

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name

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

City
FL Zip Code

B. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP GRANGER, DONALD R 754 PEACHTREE STR STE D1481 ATLANTA, GA 30308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DYKES, R.M. STE 2008 155 PEACHTREE STREET, NE ATLANTA, GA 303093610	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPSG NAULT, J. LLOYD II STE 4300 675 W PAECHTREE STREET NE ATLANTA, GA 30375	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	O MATZ, WILLIAM R 1100 ABERNATHY ROAD ATLANTA, GA 30328	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SMITH, WILLIAM L 675 W PEACHTREE STREET STE 4515 ATLANTA, GA 30375	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HARTY, LINDA S STE 2006-1155 PEACHTREE STREET ATLANTA, GA 30309	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/S/GC 675 W. Peachtree Street, NW, #4300	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Lynn Wentworth 1155 Peachtree Street, NE, #2006 Atlanta, GA 30309-3610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: Joyce Clower Irvine **3/19/04** (404) 249-4450

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Joyce Clower Irvine, Assistant Secretary