

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

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90078 035 ***150.00

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PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F97000005016

1. Corporation Name
LWP RADIO, INC.

Principal Place of Business
**601 CLEARWATER PARK ROAD
 WEST PALM BEACH FL 33401-6233
 US**

Mailing Address
**601 CLEARWATER PARK ROAD
 WEST PALM BEACH FL 33401-6233
 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/25/1997

4. FEI Number
65-0783100

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

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
Country	Country
24	29
25	30

9. Name and Address of Current Registered Agent

**WATSON, WILLIAM
 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CD PAXSON, LOWELL W	1.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P BOCOCK, JAMES B	2.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VPT TEK, ARTHUR D	3.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VPAS MORRISON, ANTHONY L	4.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S WATSON, WILLIAM L	5.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VP GAMACHE, KENNETH M.	6.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	6.4 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.

SIGNATURE: William Watson Date: 1/20/99 Daytime Phone #: (561) 659-4122

CR2E034 (11/98)