

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K10002** (9)
1. Corporation Name
PANAMA CITY COMMUNICATIONS, INC.

Principal Place of Business 12800 UNIVERSITY DRIVE SUITE 500 FT. MYERS FL 33907	Mailing Address 12800 UNIVERSITY DRIVE SUITE 500 FT. MYERS FL 33907
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/31/1987	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2863688		Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent MEEHAN, K. PATRICK 12800 UNIVERSITY DRIVE SUITE 500 FT. MYERS FL 33907		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

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

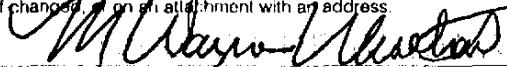
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ENGELHARDT, ROBERT G. 12800 UNIVERSITY DR, #500 FT. MYERS FL	1.1 TITLE	DIRECTOR
NAME		1.2 NAME	ROBERT PRICE
STREET ADDRESS		1.3 STREET ADDRESS	45 ROCKEFELLER PLAZA, SUITE 3201
CITY-ST-ZIP		1.4 CITY-ST-ZIP	NEW YORK NY 10020
TITLE	VTD WISEHART, M. WAYNE 12800 UNIVERSITY DR, #500 FT. MYERS FL	2.1 TITLE	PRESIDENT & CEO
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	AT MC COLLUM, GORDON A. 1801 GRAND AVENUE DES MOINES IA	3.1 TITLE	VP/TREASURER
NAME		3.2 NAME	JEFFREY L. GREEN
STREET ADDRESS		3.3 STREET ADDRESS	12800 UNIVERSITY DRIVE, SUITE 500
CITY-ST-ZIP		3.4 CITY-ST-ZIP	FT. MYERS, FL 33907
TITLE	S MEEHAN, K. PATRICK 12800 UNIVERSITY DR, #500 FT. MYERS FL	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	CD RYAN, WILLIAM J. 12800 UNIVERSITY DR, #500 FT. MYERS FL	5.1 TITLE	CHAIRMAN
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, on an attachment with an address.

SIGNATURE:



M. Wayne Wisehart

4/27/98

941-433-8220

CR2E034 (10/97)