FILED FILE NOW: FILING FEE IS \$61.25 May 08 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name (1)THE CHANNEL 13 FOUNDATION, INC. Principal Place of Business Malling Address 3213 W. KENNEDY BLVD. 3213 W. KENNEDY BLVD. 3. Date Incorporated or Qualified **TAMPA FL 33809** TAMPA FL 33609 08/07/1987 4. FEI Numbe Applied For 59-2842478 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8,75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 27 Trust Fund Contribution Added to Fees 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 28 Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DOLINER, NATHANIEL L. Street Address (P.O. Box Number is Not Acceptable) ONE HARBOUR PLACE **TAMPA FL 33601** 84 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change TITLE 1.1 TITLE MALE WHITAKER, DAVID 1.2 NAME Boylan, David 4203 W CULBREATH STREET ADDRESS 1.3 STREET ADDRESS 19110 Avenue Bayonnes TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP lμtz, FL 33549 Addition TITLE 2.1 TITLE ☐ Change Gobin, Louis NAME BRUNNER, ELIZABETH 2.2 NAME 3130 W LAMBRIGHT 215 5642 Glencrest Blvd. STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL Tampa, FL 33625 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE COOPER, TERRY NAME 3.2 NAME Fromm, Jean 3616 CASABLANCA AVE. STREET ADDRESS 3.3 STREET ADDRESS 503 Rapid Falls Drive ST.PETERSBURG FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Brandon, FL 33511 DELETE Addition Chappe TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 61 TITLE Addition TITLE

> 6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

shot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-2IP | 14. Thereby certify that the information supplied with indicated on this annual report or supplemental officer or director of the corporation or the received Block 12 or Block 13 if changed, or on an attach.

City-St-ZIP