

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001155

1. Entity Name

CHANNEL 63 OF PALM BEACH, INC.

Principal Place of Business

28059 US HIGHWAY 19 N
SUITE 300
CLEARWATER FL 33761

Mailing Address

28059 US HIGHWAY 19 N
SUITE 300
CLEARWATER FL 33761-2643

2. Principal Place of Business

3. Mailing Address
PO Box 383

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Safety Harbor, FL

Zip

Country

Zip
34695

Country

4. FEI Number

59-3567573

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHREFFLER, ROBERT H
28059 US HIGHWAY 19 N
SUITE 300
CLEARWATER FL 33761

Name

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

City

FL

Zip Code

8. 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.

SIGNATURE

Robert H Shreffler

2/11/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME RUBECK, DUSTIN
STREET ADDRESS 28059 US HIGHWAY 19 N #300
CITY-ST-ZIP CLEARWATER FL 33761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME STUECHER, DAN
STREET ADDRESS 28059 US HIGHWAY 19 N #300
CITY-ST-ZIP CLEARWATER FL 33761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME TAYLOR, J. ERIC
STREET ADDRESS 2025 INDIAN ROCKS RD
CITY-ST-ZIP LARGO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILLIAMS, PAUL
STREET ADDRESS 8 LAUREL AVE
CITY-ST-ZIP EAST ISLIP NY

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME RUSAW, RICK
STREET ADDRESS 28059 US HIGHWAY 19 N #300
CITY-ST-ZIP CLEARWATER FL 33761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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: Robert H Shreffler

2/11/00 727-536-0036

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)