

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

FILED
Apr 20 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 # **P07330** (4)
1. Corporation Name
WFTV, INC.

Principal Place of Business
**480 EAST SOUTH ST
ORLANDO FL 32801
US**

Mailing Address
**1400 LAKE HEARN DR
ATLANTA GA 30319
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/09/1985	
21 Suite, Apt. #, etc.	26	4. FEI Number 58-1633719		<input type="checkbox"/> 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	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

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	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TRIGONY, NICHOLAS D		1.2 NAME	
STREET ADDRESS 1400 LAKE HEARN DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA GA		1.4 CITY-ST-ZIP	
TITLE V	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROSE, MERRITT S., JR.		2.2 NAME	
STREET ADDRESS 480 EAST SOUTH STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL		2.4 CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MERDEK, ANDREW A		3.2 NAME	
STREET ADDRESS 1400 LAKE HEARN DRIVE		3.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA GA		3.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROUSE, JOHN J., JR.		4.2 NAME	
STREET ADDRESS 1400 LAKE HEARN DRIVE		4.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA GA		4.4 CITY-ST-ZIP	
TITLE V	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BARNETT, PRESTON B		5.2 NAME	
STREET ADDRESS 1400 LAKE HEARN DR		5.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA GA		5.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FISHER, ANDREW S		6.2 NAME	
STREET ADDRESS 1400 LAKE HEARN DR		6.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA GA		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.

SIGNATURE

[Signature]

2/21/98

(HND) 042-5144

CR2E034 (10/97)