2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State **DOCUMENT # P22841** 1. Entity Name CHANNEL 39, INC. 05-03-2001 90082 042 ***150.00 Principal Place of Business Mailing Address 435 N MICHIGAN AVE 2055 LEE STREET HOLLYWOOD FL 33020 STE 600 CHICAGO IL 60611 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0085256 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u>Corporation Service Company</u> C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 1201 Hays Street Zip Code 32301 City Tallahassee 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Addition CR2E034 (10/00 ☐ Delete TITLE ☐ Change TITLE FITZSIMONS, DENNIS J NAME NAME STREET ADDRESS STREET ADDRESS 435 NORTH MICHIGAN AVE CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60611 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME ZERWEKH, JAMES D NAME STREET ADDRESS STREET ADDRESS 2055 LEE STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Change ☐ Addition ☐ Delete TITLE TITLE SD NAME NAME KENNEY, CRANE H STREET ADDRESS STREET ADDRESS 435 N MICHIGAN AVE CITY-ST-ZIP CITY-ST-7IP CHICAGO IL 60611 ☐ Change ■ Addition ☐ Delete TITLE TITI F NAME NAME AGEMA, GERALD W STREET ADDRESS STREET ADDRESS 435 N MICHIGAN AVE CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60611 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change Addition NAME NAME

13. Thereby 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 receivery or trustee empowered to execute this report as equired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapted or on an attachment with the orders with III or measured. changed, or on an attachmen I other like empowered address, with

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Crane H. Kenney

4-20-2001

312-222-3277