

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

FILED
May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P32180**

(2)

1. Corporation Name
SOUTHEAST LPTV, INC.



Principal Place of Business 12425 28TH ST., N. SUITE 300 ST PETERSBURG FL 33716 US	Mailing Address 12425 28TH ST., N. SUITE 300 ST PETERSBURG FL 33716-1826 US
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2. Principal Place of Business 21 2501 118th Ave. N Suite, Apt. #, etc. 22 City & State 23 St. Petersburg, FL Zip 24 33716	2a. Mailing Address 26 P.O. Box 9090 Suite, Apt. #, etc. 27 City & State 28 Clearwater, FL Zip 29 34618-9090	Country 25 USA	Country 30 USA
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3. Date Incorporated or Qualified 12/13/1990	3a. Date of Last Report 03/12/1996
4. FEI Number 59-3036523	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

12. OFFICERS AND DIRECTORS	
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	PTD GRANT, STEVEN H
STREET ADDRESS	12425 28TH ST. N.
CITY-ST-ZIP	ST PETERSBURG FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	DS DRAYER, MICHAEL
STREET ADDRESS	12425 28TH ST N
CITY-ST-ZIP	ST. PETERSBURG FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	D/P LYON, RICHARD
1.3 STREET ADDRESS	2501 118th Avenue N.
1.4 CITY-ST-ZIP	St. Petersburg, FL 33716
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	D/T KRALL, LYNN
2.3 STREET ADDRESS	2501 118th Avenue N.
2.4 CITY-ST-ZIP	St. Petersburg, FL 33716
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	S HOLTZMAN, H. STEVEN
3.3 STREET ADDRESS	2501 118th Avenue N.
3.4 CITY-ST-ZIP	St. Petersburg, FL 33716
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	AS WATERS, ELIZABETH A.
4.3 STREET ADDRESS	2501 118th Avenue N.
4.4 CITY-ST-ZIP	St. Petersburg, FL 33716
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 in an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)