FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

300001763663
-04/01/96--01010--020
***800.00

DOCUMENT # **P35286** **(4)**

1. Corporation Name

AMERICAN TELECASTING OF FORT MYERS, INC.

Principal Place of Business	Mailing Address
4065 N. SINTON ROAD STE 201 COLORADO SPRINGS CO 80907 US	111 S. TEJON STE. 400A COLORADO SPRINGS FL 80903 US

3. Date Incorporated or Qualified: 08/28/1991
3a. Date of Last Report: 04/26/1995
4. FEI Number: 59-3062505 (Applied For / Not Applicable)
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 5500-2 Division Drive	26 5575 Tech Center Dr.
22 Suite, Apt. #, etc.	27 Suite 300
23 City & State: Fort Myers, FL	28 City & State: Colorado Springs, CO
24 Zip: 33905 — 25 Country: USA	29 Zip: 80919 — 30 Country: USA

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
SUITE 105
TALLAHASSEE FL 32301

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

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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when changed)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	PD ☒ Change ☐ Addition
NAME	GAST, BRIAN E.		1.2 NAME	Hostetler, Robert D.
STREET ADDRESS	ATI 4065 N. SINTON 201		1.3 STREET ADDRESS	5575 Tech Center Dr., Ste. 300
CITY-ST-ZIP	COLORADO SPRINGS CO 80907		1.4 CITY-ST-ZIP	Colorado Springs, CO 80919
TITLE	STD	☐ DELETE	2.1 TITLE	SD ☒ Change ☐ Addition
NAME	SENEY, RICHARD F.		2.2 NAME	
STREET ADDRESS	4 SAWGRASS VILLAGE 158		2.3 STREET ADDRESS	5575 Tech Center Dr., Ste. 300
CITY-ST-ZIP	PONTE VEDRA BCH FL 32082		2.4 CITY-ST-ZIP	Colorado Springs, CO 80919
TITLE	D	☐ DELETE	3.1 TITLE	TVD ☒ Change ☐ Addition
NAME	DEPRIEST, DOANLD R.		3.2 NAME	Sentman, David K.
STREET ADDRESS	206 8TH ST N.		3.3 STREET ADDRESS	5575 Tech Center Dr., Ste. 300
CITY-ST-ZIP	COLUMBUS MS 39701		3.4 CITY-ST-ZIP	Colorado Springs, CO 80919
TITLE	D	☐ DELETE	4.1 TITLE	DC ☒ Change ☐ Addition
NAME	BLAKE, WILLIAM J		4.2 NAME	DePriest, Donald R.
STREET ADDRESS	1105 NORTH WAVERLY PLACE		4.3 STREET ADDRESS	5575 Tech Center Dr., Ste. 300
CITY-ST-ZIP	MILWAWKEE WI		4.4 CITY-ST-ZIP	Colorado Springs, CO 80919
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	HAUSER, MITCHELL R.		5.2 NAME	
STREET ADDRESS	153 EAST 53RD STREET, STE. 5801		5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	D ☒ Change ☐ Addition
NAME	HOSTETLER, ROBERT D		6.2 NAME	Blake, William J.
STREET ADDRESS	4065 N. SINTON RD., STE. 201		6.3 STREET ADDRESS	5575 Tech Center Dr., Suite 300
CITY-ST-ZIP	COLORADO SPRINGS CO		6.4 CITY-ST-ZIP	Colorado Springs, CO 80919

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: David K. Sentman — 3/20/96 — 719-260-5180
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

3-29-1996