FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mownam-

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000011550 (8)

CHANNEL 66 OF TAMPA, INC.

FILED Apr 29 1996 8:00 am Secretary of State

Principal Place of Business Mailing Address		·····		1 8614) ORADI NIDAN METAL DIREK BANDI ORDI 1941
14444 66TH STREET N CLEARWATER FL 34624	14444 66TH STREET N CLEARWATER FL 34624			·
			 Date Incorporated or Qualified 02/11/1994 	3a. Date of Last Report 05/01/1995
Tage 1	2a. Mailing Address		4. FEI Number 59-3227857	Applied For
Suite, Apt. #, etc.	Suite Apt. #, etc.		39 3227637	Not Applicable
	27		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	Oty & Stale		6. Election Campaign Financing	\$5.00 May Be
Zip Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
		30		□ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
MATAGONI SAMANANA			SHREFFLER, ROBERT	
WATSON, WILLIAM L	82 Street	Address (P.O. Box Number is Not Acceptab	le)	
18401 U.S. HWY. 19 NORTH CLEARWATER FL 35624	83	14444 66TH STREET N.		
OLEANWATEN FL 33024		63		
		84 City	CLEARWATER	FL 85 Zip Code 34624
11: Pursuant to the provisions of Sections 607,0502 and	l 607.1508, Florida Statutes,	the above named co	orporation submits this statement for the pur	Duse of changing its registered office
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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 507,0505. Florida Statutes.				
SIGNATURE Property Master 1806 11/2/16				
জীয় আদে চাঞ্চল or protect for each regist and per tar a per 12. OF FIGERS AND DIF	California INMET		equired varie remistating	DATE
THE C	DELETE	13.	ADDITIONS/CHANGES TO OFF	
NAME WEST, JAMES L		1 2 NAME	10 T	Change 💢 Addition
STREET ADDRESS 14444 66TH STREET N		1.3 STREET ADDRESS	SHREFFLER, ROBERT	
CITY-ST-ZIP CLEARWATER FL 34624		1.4 CITY - ST - ZIP	14444 66TH STREET N.	
TITLE D	☐ DELETE	2 1 TITLE	CLEARWATER, FL 34624 S	☐ Change ← Addition
NAME TAYLOR, J ERIC JR		2.2 NAME	MCDOWELL, GIL	
STREET ADDRESS 2025 INDIAN ROCKS RD		2.3 STREET ADDRESS	14444 66th ST N	İ
CITY-ST-ZIP LARGO FL 34649		2.4 CITY-S1 - Z-P	CLEARWATER, FL 3462	4
TITLE D	☐ DELETE	3 1 THTLF	THE DATE OF THE DATE OF THE DATE OF THE OFFICE OFFICE OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFI	Change Addition
NAME WILLIAMS, PAUL		3.2 NAME +		
STREET ADDRESS 8 LAUREL AVENUE		3.3 STREET ADDRESS		
CITY-ST-ZIP EAST ISLIP NY 11730		3.4 C(1Y - S1 - Z)P		
TITLE D NAME KELLY, DON	☐ DELETE	4 1 TITLE		Change Addition
		4.2 NAME	00000180	ກັດຮັ້ນັດ
STREET ADDRESS 5525 S. MISSION ROAD #1207 TUCSON AZ 85746		4.3 STREET ADDRESS	-04/29/96011	35 022
TITLE 12	DELETE	44 C-17 - ST - 7-P	***200.00	
NAME STUECHER, DAN	m accor	5 2 NAME		Change Addition
STREEL ADDRESS 3380 S.R. 580		5 3 STREET ADORESS		
CITY-ST-ZIP SAFETY HARBOR FL 34695		5 4 CITY - ST - ZIP		
TITLE D	DELETE	6 1 TITUE		Change Addition
MORGAN, CHARLES O JR		6.2 NAME		Addition:
STREET ADDRESS 1300 NORTHWEST 167TH STREE	ET	6.3 STREET ADDRESS		/129
CITY-ST-ZIP MIAMI FL 33169		64 C/TY-ST ZIP		

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)(k). Florida Statutes I furnier certify that the information indicated on this arrival 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, grion an attachment with an address.

SIGNATURE:

Wills TH. Shreftle.
TURE AND TYPED OR PRINTED HAMP OF SIGNING OFFICER OR DIRECTOR

4/3/96 8/3-536-0036