

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 DEC 20 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000011550

1. Corporation Name

Channel 66 of Tampa, Inc.

Principal Place of Business
14444 66th Street N
Clearwater, FL 34624

Mailing Address
14444 66th Street N
Clearwater, FL 34624

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
231 Bradley Place

Suite, Apt. #, etc.
Suite 204

City & State
Palm Beach FL

Zip
33480

Country

3. New Mailing Office Address, If Applicable
400 N. Ashley Dr.

Suite, Apt. #, etc.
Suite 2300

City & State
Tampa, FL

Zip
33602

Country

Hillsborough

REINSTATEMENT 1999

4. Date Incorporated or Qualified
To Do Business in Florida

2/11/94

5. FEI Number 59-3227857

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DP	Rošlyck Paxson	231 Bradley Place, Suite 204 Palm Beach, FL 33480	
DVPST	Devon Paxson	231 Bradley Place, Suite 204 Palm Beach, FL 33480	
			200003103592--4 -01/20/00--01011--009 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

Shreffler, Robert
14444 66th Street N.
Clearwater, FL 34624

9. Name and Address of New Registered Agent

Name
Intrastate Registered Agent Corporation
Street Address (P.O. Box Number is Not Acceptable)
701 Brickell Avenue, Suite 3000
Suite, Apt. #, Etc.
City Miami State FL Zip Code 33131

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent By: [Signature]
Intrastate Registered Agent Corporation
Its: Vice President

Date

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature] Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/2/99
Date

Daytime Phone #