

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P94000011550**

1. Entity Name

CHANNEL 66 OF TAMPA, INC.**FILED**
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90081 026 ***150.00

0338770

Principal Place of Business

**231 BRADLEY PLACE
SUITE 204
PALM BEACH FL 33480**

Mailing Address

**400 N. ASHLEY DR.
SUITE 2300
TAMPA FL 33602**

2. Principal Place of Business

601 Clearwater Park Road

Suite, Apt. #, etc.

3. Mailing Address

601 Clearwater Park Road

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State West Palm Beach, Florida		City & State West Palm Beach, Florida		4. FEI Number 59-3227857	Applied For <input type="checkbox"/> Not Applicable
Zip 33401-6233	Country	Zip 33401-6233	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent**INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI FL 33131****7. Name and Address of New Registered Agent**

Name William L. Watson
Street Address (P.O. Box Number is Not Acceptable) 601 Clearwater Park Road
City West Palm Beach
State FL
Zip Code 33401-6233

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)

DATE

4/18/019. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE PD	<input type="checkbox"/> Delete
NAME PAXSON, ROSLYCK	
STREET ADDRESS 231 BRADLEY PLACE, SUITE 204	
CITY-ST-ZIP PALM BEACH FL 33480	
TITLE VSTD	<input type="checkbox"/> Delete
NAME PAXSON, DEVON	
STREET ADDRESS 231 BRADLEY PLACE, SUITE 204	
CITY-ST-ZIP PALM BEACH FL 33480	
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	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Paxson, Lowell W.	
STREET ADDRESS 601 Clearwater Park Road	
CITY-ST-ZIP West Palm Beach, Florida 33401-6233	
TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Sagansky, Jeffrey	
STREET ADDRESS 601 Clearwater Park Road	
CITY-ST-ZIP West Palm Beach, Florida 33401-6233	
TITLE VP /T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Severson, Thomas E. Jr.	
STREET ADDRESS 601 Clearwater Park Road	
CITY-ST-ZIP West Palm Beach, Florida 33401-6233	
TITLE VP/AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Morrison, Anthony L.	
STREET ADDRESS 601 Clearwater Park Road	
CITY-ST-ZIP West Palm Beach, Florida 33401-6233	
TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Weinstein, Adam K.	
STREET ADDRESS 601 Clearwater Park Road	
CITY-ST-ZIP West Palm Beach, Florida 33401-6233	
TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Watson, William L.	
STREET ADDRESS 601 Clearwater Park Road	
CITY-ST-ZIP West Palm Beach, Florida 33401-6233	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William L. Watson 4/18/01

Date

Daytime Phone #

CR2E034 (10/00)