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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000011565 (6)

PAXSON COMMUNICATIONS OF MIAMI-35, INC.

Principal Place of Business Mailing Address

18401 U.S. HWY. 19 NORTH 601 CLEARWATER PARK RD.

W. DALM BEACH EL 20201 W. BAIM BEACH EL 20201 EL 202

## FILED Feb 26 1997 8:00am Secretary of State



W. PALM BEACH FL 33401 US		W. PALM BEACH FL 33401-6233 US									
							Date Incorporated or Qualified 02/11/1994	3a. Da 02/	ate of L 06/19		port
:	ace of Business	2a. Mailing Address				4. FEI Number				Applied For	
1		26	******			<del> </del>	65-0471066				Applicable
Suite, Apt #, etc		Su-le, Apt. #, etc.				5.	Certificate of Status Desired	\$8.75 Additional Fee Required			
Cily & State	)	City & State					Election Campaign Financing Trust Fund Contribution			5.00 h dded to	May Be
Zip	Country	Zip	Count	ry		8.	This corporation has liability for			ider s.	199.032,
4	25	29	30					] Yes [			,,
	9. Name and Address of Curren	Registered Agent		<del></del>		10.	Name and Address of New Re	glatered	Agent		,
	ISON, WILLIAM L		8	II N	Name						
	CLEARWATER PARK RD.		Ë	2 8	Street Addre	ess (P.	O. Box Number is Not Acceptab	le)	· · · · · ·		/#####################################
W. I	PALM BEACH FL 33401		<u> </u>	+							
			ا	3							
			8	4 (	City				85	Zip C	ode
	to the provisions of Sections 607.050.				····			<u>FL</u>			
SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation is supported by the state of the state		TE: Registered A					DATE			
2.	OFFICERS AND		13.	-			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRE	CTORS	3 IN 12
TILE	CEOD	☐ DELETE	1.1 1111	Ē	D	ire	ctor/Chairman		Ch Ch	ange	Additio
NAME	PAXSON, LOWELL W		1.2 NAM	Έ			11 W. Paxson				
STREET ADORESS	601 CLEARWATER PARK RD.		1.3 SFR6	ET AD			Clearwater Park R				
DITY-ST ZIP	W. PALM BEACH FL		1.4 CITY	- 51 - 2	<sub>SIP</sub>   W	est	Palm Beach, Flor	ida -	3340	)1-6	233
TITLE	P	DELETE	2.1 TITL	É					☐ Ch.	ange	Additio
NAMF	BOCOCK, JAMES		2.2 NAM	ίΕ	1						
STREET ADDRESS	601 CLEARWATER PARK RD.		2.3 STAE	ET ADI	DRESS						
CITY - ST - ZIP	W. PALM BEACH FL		2. 4 CIT	/-ST-7	ZIP						
ITLE	VPT	DELETE	3.1 TITL	i					☐ Ch	ange	Addition Addition
NAME	tek, arthur		3.2 NAM	ιE							
STREET ADDRESS	601 CLEARWATER PARK RD.		3.3 STRE	ET AD	ORESS						
CiTY - ST - ZIP	W. PALM BEACH FL		3.4 CIT	/-ST-7	ZIP						
TITLE	S	DELETE	4.1 TITL	Ε					☐ Ch	ange	Additio
NAME	WATSON, WILLIAM L.		4. 2 NAS	λE							
STREET ADDRESS	601 CLEARWATER PARK RD.		4.3 \$TRE	ET AD	ORESS						
DITY-ST-ZIP	W. PALM BEACH FL		4.4 CITY	- ST - 2	žiP						
IILE	VPAS	DELETE	5 1 TITL	E					Ch Ch	ange	Additio
NAME	MORRISON, ANTHONY L.		5.2 NAM	.E	ļ						
STREET ADDRESS	601 CLEARWATER PARK RD.		5.3 STAI	et ad'	DRESS						
CITY-ST-ZiF	W. PALM BEACH FL		5.4 City	- Sĭ - Z	ŽIP				<del></del>		
TITLE		DELETE	6.1 TITL	E					Ch	ange	Additio
NAME			6.2 NAM	Æ							
STREET ADDRESS			6.3 STRI	ET AD	DRESS						
CITY-ST-ZIP			6.4 CITY								
14 Ldo borol	w cortify that the information supplier	with this filing done not aug	life for the p	vami	ntion elated	I in Sa	ction 119 07/3\(ii) Florida Statute	e I furthe	r confi	v that t	he

4. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes: 1 furner certify that 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 chapter 607 an attainment with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

114197

(5501) (69-4188) Daylinie Priorie