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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000035065 (9)

1. Corporation Name

PAXSON WEST PALM BEACH LICENSE, INC.

Principal Place of Business

601 CLEARWATER PARK ROAD
WEST PALM BEACH FL 33401
US

Mailing Address

601 CLEARWATER PARK ROAD
WEST PALM BEACH FL 33401-6233
US



3. Date Incorporated or Qualified

05/10/1994

3a. Date of Last Report

03/07/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-3291836

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

9. Name and Address of Current Registered Agent

WATSON, WILLIAM L
601 CLEARWATER PARK ROAD
WEST PALM BEACH FL 33401

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CCEO
NAME PAXSON, LOWELL W
STREET ADDRESS 601 CLEARWATER PARK ROAD
CITY- ST- ZIP WEST PALM BEACH FL
☐ DELETE

TITLE P
NAME BOCOCK, JAMES
STREET ADDRESS 601 CLEARWATER PARK ROAD
CITY- ST- ZIP WEST PALM BEACH FL
☐ DELETE

TITLE VPT
NAME TEK, ARTHUR
STREET ADDRESS 601 CLEARWATER PK RD
CITY- ST- ZIP W. PALM BEACH FL
☐ DELETE

TITLE S
NAME WATSON, WILLIAM L
STREET ADDRESS 601 CLEARWATER PARK ROAD
CITY- ST- ZIP W. PALM BEACH FL
☐ DELETE

TITLE VPAS
NAME MORRISON, ANTHONY L.
STREET ADDRESS 601 CLEARWATER PARK ROAD
CITY- ST- ZIP W. PALM BEACH FL
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director/Chairman
1.2 NAME Lowell W. Paxson
1.3 STREET ADDRESS 601 Clearwater Park Road
1.4 CITY- ST- ZIP West Palm Beach, Florida 33401-6233
☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/14/97

(508) 659-4100

CR2E034 (9/96)