Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90078 039 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400085416 ·

Corporation PAXSON	COMMUNICATIONS OF NE							
Principal Place of Business Mailing Address					* 10011001 ISB (0511 05011 04111 E	7111 48 111 6818 1 1	1919) 61111 61991 1	1010 0111 1001
601 CLEARWATER PARK RD. 601 CLEARWATER PARK RD.								
W. PALM BEACH FL 33401 W. PALM BEACH FL 33401 US					DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualifed			
					11/23/1994			l
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Apr	plied For
21 26		26			59-3283739			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A		
i		27				Fee Red		
City & State		City & State		6. Election Campaign Financing		\$5.00 i	, ,	
23		28 Country		Trust Fund Contribution		Added to	J rees	
Zip Country Zip		<u> </u>			This corporation owes the cur Personal Property Tax.	rent year int		□No
24	25 9. Name and Address of Current		<u>U]</u>		10. Name and Address of New	Registered		
9, Name and Address of Current registered Agent				Name				
WATSON, WILLIAM L			-	O4	(D.O. Boy Number in Not Accept	labla)		
601 CLEARWATER PARK ROAD			82	Street Addre	ess (P.O. Box Number is Not Accept	able)		
W PALM BEACH FL 33401			83					-
				<u> </u>			85 Zip C	`ada
			84 City			FL	. 85 Zip C	,oue
office or re agent. I ar SIGNATURE	to the provisions of Sections 607.0502 sgistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent	of Florida. Such change was auti ions of, Section 607.0505, Florid	horized by la Statutes	the corporation	on's board of directors. I hereby acce	pt the appoint	ntment as reg	jistered
12.	OFFICERS AND DIRECTORS		13		ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	DC	☐ DELETE	1.1 TITLE				Change	Addition
NAME	PAXSON, LOWELL W		1.2 NAME					;
STREET ADDRESS	601 CLEARWATER PARK RD.			FADDRESS				
CITY-ST-ZIP			1.4 CITY-S	T-ZIP				— Addition
TITLE	Р	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	BOCOCK, JAMES		2.2 NAME					
STREET ADDRESS	601 CLEARWATER PARK RD.			ADDRESS				
CITY-ST-ZIP	W. PALM BEACH FL	☐ DELETE	2.4 CITY-S 3.1 TITLE	ST-ZIP			[T] Change	☐ Addition
TITLE	TVP	□ pereie					□ onenĝe	
NAME	TEK, ARTHUR 601 CLEARWATER PARK RD.		3.2 NAME	***************************************	•			
STREET ADDRESS	W. PALM BEACH FL.		3.3 STREET	i				
CITY-ST-ZIP TITLE	S S		3.4. CITY-S 4.1 TITLE	51-ZIP	····		Change	Addition
NAME	WATSON, WILLIAM L	<u></u>	4 2 NAME				_	_
STREET ADDRESS	601 CLEARWATER PARK RD.		4.3 STREET	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-S					,
TITLE	VPAS	☐ DELETE	51 TITLE			•	Change	☐ Addition
NAME	MORRISON, ANTHONY L.		5.2 NAME				•	
STREET ADDRESS			53 STREET	TADDRESS				
CITY-ST-ZIP	W. PALM BEACH FL			T-ZIP				
TITLE	—		6.1 TITLE				Change	Addition
NAME	CHIMACIE, RETITETT III.		6.2 NAME					
STREET ADDRESS	601 CLEARWATER PARK ROAD 63		6.3 STREET	TADDRESS				

14. I 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 any statement with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

WEST PALM BEACH FL 33401