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Feb 26 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 # P95000036550 (8)

1. Corporation Name  
PAXSON COMMUNICATIONS OF CLEVELAND-67, INC.



Principal Place of Business  
601 CLEARWATER PARK RD.  
WEST PALM BEACH FL 33401  
US

Mailing Address  
601 CLEARWATER PARK RD.  
WEST PALM BEACH FL 33401-6233  
US

3. Date Incorporated or Qualified 05/09/1995	3a. Date of Last Report 02/06/1996
4. FEI Number 59-3319725	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29

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	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCEO	1.1 TITLE	Director/Chairman
NAME	PAXSON, LOWELL W	1.2 NAME	Lowell W. Paxson
STREET ADDRESS	601 CLEARWATER PARK RD.	1.3 STREET ADDRESS	601 Clearwater Park Road
CITY - ST - ZIP	WEST PALM BEACH FL 33401	1.4 CITY - ST - ZIP	West Palm Beach, Florida 33401-6233
TITLE	P	2.1 TITLE	
NAME	BOCOCK, JAMES B	2.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK RD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33401	2.4 CITY - ST - ZIP	
TITLE	VPT	3.1 TITLE	
NAME	TEK, ARTHUR D	3.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK RD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33401	3.4 CITY - ST - ZIP	
TITLE	S	4.1 TITLE	
NAME	WATSON, WILLIAM L	4.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK RD.	4.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33401	4.4 CITY - ST - ZIP	
TITLE	VAS	5.1 TITLE	
NAME	MORRISON, ANTHONY L	5.2 NAME	
STREET ADDRESS	601 CLEARWATER PARK RD	5.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33401	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 of this filing, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/97

Date

(561) 659-4100

Daytime Phone #

CR2E034 (9/96)