2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P95000065329** Mar 01, 2000 8:00 am 1. Entity Name **Secretary of State** PAXSON NEW YORK LICENSE, INC. 03-01-2000 90087 001 26,250.00 Mailing Address Principal Place of Business 601 CLEARWATER PARK ROAD 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401-6233 WEST PALM BEACH FL 33401 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0611721 Not Applicable Country \$8.75 Additional Country Zip Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WATSON, WILLIAM L Street Address (P.O. Box Number is Not Acceptable) 601 CLEARWATER PARK ROAD WEST PALM BEACH FL 33401 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12, 11. Addition TITLE ☐ Delete TITLE PAXSON, LOWELL W NAME NAME STREET ADDRESS STREET ADDRESS 601 CLEARWATER PARK ROAD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Addition Change Ch ■ Delete TITLE TITLE Sagansky, Jeff BOCOCK, JAMES B NAME NAME STREET ADDRESS 601 Clearwater Park Road STREET ADDRESS **601 CLEARWATER PARK ROAD** CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, Florida 33401-6233 WEST PALM BEACH FL 33401 Addition ☐ Change ☐ Delete TITLE TITLE MORRISON, ANTHONY L NAME NAME STREET ADDRESS **601 CLEARWATER PARK ROAD** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL Change ☐ Addition ☐ Delete TITLE TITLE WATSON, WILLIAM L NAME NAME STREET ADDRESS **601 CLEARWATER PARK ROAD** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 X Change ☐ Addition Delete TITLE TITLE Grossman, Seth A. TEK, ARTHUR D NAME NAME 601 Clearwater Park Road STREET ADDRESS 601 CLEARWATER PARK ROAD STREET ADDRESS CITY-ST-ZIP 33401-6233 West Palm Beach, Florida CITY-ST-ZIP WEST PALM BEACH FL 33401 TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 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, Secretary 561-659-4122

Daytime Phone #

CR2E034 (9/99)