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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P95000085626 (6) DOCUMENT #
1. Corporation Name

PAXSON COMMUNICATIONS OF RALEIGH DURHAM-47, INC.

FILED Feb 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					•		.,,,		· · · · · · · · · · · · · · · · · · ·	
601 CLEARWATER PARK ROAD 601 CLEARWATER PARK RO										
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 334				3401		DO NOT WRITE	DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified				
						11/07/1995				
<u> </u>	lace of Business	2a. Mailing	Address			4. FEI Number			plied For	
21	H -A	26	Suite, Apt. #, etc.			65-0628624	•		t Applicable	
Suite, Apt.	#, OLC.	27	 			5. Certificate of Status Desired		Fee Re	dditional quired	
City & State	9		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	28 ZID	Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25 29 30			—	Personal Property Tax due June 30. Yes No				1	
	9. Name and Address of Curr					10. Name and Address of New Ro		nt		
WA	ITSON, WILLIAM L		-	81	Name)				
601 CLEARWATER PARK ROAD			82	Street	Address (P.O. Box Number is Not Accepta	ble)				
WE	ST PALM BEACH FL 33401			83					···	
				84	City		FL®	5 Zip C	Code	
Discount of	to the previous of Continue CO7.0	E02 and 607 1509	Florido Statuto	a the abou	0.00000	d corporation submits this statement for the		anging its	registered	
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 Stonsture, typed or profiled name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Signature, typed or printed name of registored agent and little if applicable. (NOTE: R 12. OFFICERS AND DIRECTORS				13.	eni signalur	ADDITIONS/CHANGES TO OFFI		RECTOR	S IN 12	
TITLE	DC	III DINEOTONO	DELETE	1.1 TITLE		NASSITIONO, OTANIO CONTROLO		Change	Addition	
NAME	PAXSON, LOWELL W			1.2 NAME						
STREET ADDRESS 601 CLEARWATER PARK ROAD				1.3 STREET	ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL 33	401		1.4 CITY-	ST-ZIP					
TITLÉ	P		DELETE	2.1 TITLE				Change	Addition	
NAME	BOCOCK, JAMES B			2.2 NAME						
STREET ADDRESS	601 CLEARWATER PARK F)		r address					
CITY-ST-ZIP	WEST PALM BEACH FL 33	401	Dougram.	2. 4 CITY-	ST-ZIP		···	Obsession	Addison	
TITLE	TEV ADTIVIDED		☐ DELETE	3.1 TITLE			اسا	Change	Addition	
NAME	TEK, ARTHUR D	DAD.		3.2 NAME						
STREET ADDRESS	WEST DAIM DEACH EL 22401				T ADDRESS					
CITY-ST-ZIP	VAS		DELETE	3,4. CITY-	ST-ZIP		П	Change	Addition	
TITLE NAME	MORRISON, ANTHONY L		_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4, 2 NAME			لب			
STREET ADDRESS	601 CLEARWATER PARK F	OAD			ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL 33			4.4 CITY -						
TITLE	8		☐ DELE TÉ	5.1 TITLE	V1 E.II			Change	Addition	
NAME	WATSON, WILLIAM L.			5.2 NAME						
STREET ADDRESS	601 CLEARWATER PARK P	OAD		5.3 STREE	ADDRESS	·				
CITY-ST-ZIP	WEST PALM BEACH FL 33	401		5.4 CITY-	ST-ZIP	<u> </u>				
TITLE			DELETE	6.1 TITLE		Vice President		Change	Addition	
NAME				6.2 NAME		Kenneth M. Gamache				
STREET ADDRESS				6.3 STREE	ADDRESS	1			_	
CITY-ST-ZIP				6.4 CITY - :		West Palm Beach, Flori		01-62		
14 I herehy r	beildres and temporal add that without	with this filing do	es not qualify for	the exemi	tion stat	ted in Section 119.07(3)(i), Florida Statutes.	turther certify	that the	information	

Indicated on this annual report or supplies with this limit does not quality for the exemption stated in declining 119.07(3)(1), Florida Statutes. 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 oak; that I am an officer or director of the corporation of 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, gruin an intachment with an address.

Secretary

(561) 659-4122