2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000045522

Entity Name: ION MEDIA OF OKLAHOMA CITY, INC.

FILED Mar 26, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place of Business:			
	RWATER PAF LM BEACH, F					
Current Mailing Address:			New Mailing Address:			
	RWATER PAF LM BEACH, F					
FEI Number	: 65-0682182	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ())
Name and	d Address of (Current Registered Agent:	Name and	Address of I	New Registered Agent:	
601 CLEA	, WILLIAM L E RWATER PAF LM BEACH, F					
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered o	office or registered agent, or b	oth,
SIGNATU						
	Electro	nic Signature of Registered Ac	gent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	BURGESS, R. 601 CLEARWA) Delete BRANDON ATER PARK ROAD BEACH, FL 334016233	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	BURGESS, R. 601 CLEARWA) Delete BRANDON ATER PARK ROAD BEACH, FL 334016233	Title: Name: Address: City-St-Zip:	() Change()Addition	
Title: Name: Address:	BURGESS, R.) Delete BRANDON	Title: Name:	() Change () Addition	
City-St-Zip:		ATER PARK ROAD BEACH, FL 334016233	Address: City-St-Zip:			
City-St-Zip: Title: Name: Address: City-St-Zip:	WEST PALM E V/AS (WEINSTEIN, A 601 CLEARWA	BEACH, FL 334016233) Delete		QUINN, JEFF 601 CLEARWA	() Change()Addition ATER PARK ROAD BEACH, FL 334016233	
Title: Name: Address:	WEST PALM B V/AS (WEINSTEIN, A 601 CLEARWA WEST PALM B S (WATSON, WIL 601 CLEARWA	BEACH, FL 334016233) Delete DAM K ATER PARK ROAD BEACH, FL 334016233) Delete	City-St-Zip: Title: Name: Address:	QUINN, JEFF 601 CLEARWA WEST PALM E	ATER PARK ROAD	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM L. WATSON S 03/26/2009