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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000016837 (1)**

PAXSON COMMUNICATIONS OF PITTSBURGH-40, INC.

1		
ſ	Principal Place of Business	Ma
١	601 CLEARWATER PARK RD.	60
1	W DAIM DEACH EL 22404	W

## **FILED** Feb 23 1998 8:00am Secretary of State



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Principal Plac	e of Business	Mailing Address	. saarinat 118 1811 1824 68141 86111 88111 88161	merk auch reide siet jage jage				
601 CLEARWATER PARK RD. 601 CLEARWATER PARK RD.					]			
W PALM BEACH FL 33401 W PALM BEACH FL 33401			01		DO NOT WRITE IN THIS SPACE			
j					Ì	3. Date Incorporated or Qualified		
L		· · · · · · · · · · · · · · · · · · ·				02/21/1997		
	ncipal Place of Business 2a. Mailing Address			4. FEI Number	Applied For			
21 26					65-0731832	Not Applicable		
22						5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23			<del></del>			Trust Fund Contribution Added to Fees		
Zip	Country	7 <sub>1</sub> p	<del>-</del>	Country  8. This corporation owes or has paid the current year Intangible				
24	9. Name and Address of Curre	29	30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
1414		III Nagisterau Agent		1 N	ame	10. Name and Address of New Aegisters	d Whatr	
1	ITSON, WILLIAM L		[]	"[ ]"				
	601 CLEARWATER PARK RD. W PALM BEACH FL 33401			82 Street Add		s (P.O. Box Number is Not Acceptable)		
			8	3	T-11			
			8	4 Ci	ity		85 Zip Code	
11 Pursuant	to the provisions of Sections 607 050	02 and 607 1508. Florida Statut	tes the abo	ve-na	med corpor			
office or r	egistered agent, or both, in the State m familiar with, and accept the oblic	e of Florida, Such change was pations of Section 607,0505, FI	authorized orida Statu	by the	corporation	ation submits this statement for the purpose o's board of directors. I hereby accept the a	ppointment as registered	
SIGNATURE								
	Signature, typed or printed name of registereding			genl sig	nature required	when reinstating) DATE		
12.	D OFFICERS AN	ID DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition	
TITLE	PAXSON, LOWELL W		1.1 1010			ector/Chairman	CHAILDS CT MODITION	
NAME				ell W. Paxson	/			
STREET ADDRESS	W DAILA BEACH EL 20404				Clearwater Park Road	20101 (000		
CITY-ST-ZIP TITLE	TT TALM DEADTITE 55401	DELETE	1.4 City 2.1 Title			t Palm Beach, Florida	33401-6233 / Change	
NAME		bittle	2.1 MIL			sident	CT change Provident	
			2.3 STRE			es B. Bocock Clearwater Park Road		
STREET ADDRESS						t Palm Beach, Florida	22601. 6222	
CITY-ST-ZIP TITLE		DELETE	2.4 CIT				33401-6233 / Change	
NAME			3 7 111L			asurer/Vice President hur D. Tek	The Avenue Avenue	
1 1			3.2 NAM 3.3 STHE		i -	Clearwater Park Road	,	
STREET ADDRESS			2.0				33401-6233	
CITY-ST-ZIP		DELETE	3.4. CITY 4.1 TITL					
i I		☐ DELETE				e President/Assistant S hony L. Morrison	eogerary 5	
NAME CYDECY ADDRESS			4. 2 NAM		l l	<b>₹</b>	•	
STREET ADDRESS			4.3 STRE			Clearwater Park Road	22/01 6222	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY 5.1 TITU			t Palm Beach, Florida	33401-6233 / Addition	
• •		רי אנונונ				e President	Li shange Ly houlden	
NAME			5.2 NAM		J	neth M. Gamache	· /	
STREET ADDRESS			5.3 STAE		004	Clearwater Park Road	20/01 /000 /	
CITY-ST-ZIP		DELETE	5.4 CITY		ľ	t Palm Beach, Florida	33401-6233 Change D (oddition	
TITLE		☐ butter	6.1 T/TL			retary	CI CHAIRE TO MINION	
NAME			6.2 NAM		l l	liam L. Watson	ļ	
STREET ADORESS			6.3 STRE		001	Clearwater Park Road		
CITY-ST-ZIP		114. 4	64 CITY	-ST-ZIP	Wes	t Palm Beach, Florida	33401-6233	

indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 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, if in an algorithment with an address.

SIGNATURE:

Secretary

(561) 659-4122