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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000063215 (2) DOCUMENT # 1. Corporation Name

D P MEDIA LICENSE OF ST. LOUIS, INC.

FILED

98 MAR 20 PM 1:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place	e of Business	Mailing Address				A STATE OF THE PARTY OF THE PAR		
	ASHLEY DRIVE	700 NORTH ASHLEY D	700 NORTH ASHLEY DRIVE SUITE 2300					
SUITE 2300								
TAMPA FL 33	1902	TAMPA FL 33602				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 07/22/1997		
	ace of Business	2a. Mailing Address				4. FEI Number 65 – 0769776 Applied Fo	Эľ	
21 231 B	231 Bradley Place 26 400 North Ashley			ey Driye		Not Applic	able	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additions	al l£	
22 Suite		27 Suite 2300	l			Fee Required		
City & State		City & State				Election Campaign Financing \$5.00 May Be	.	
23 Palm I		28 Tampa FL				Trust Fund Contribution		
Tip	Country	Zip		untry	•	8. This corporation owes or has paid the current year Intangible		
24 3348		29 33602	30	_		Personal Property Tax due June 30. Yes No		
1617	9, Name and Address of C			81	Name	10. Name and Address of New Registered Agent		
	RASTATE REGISTERED AG	ENI CURPURATION		0'	name			
	BRICKELL AVE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	\dashv	
	ITE 3000			<u> </u>				
MIA	VMI FL 33131-3209			83				
				84	City	E 85 Zip Code	ᅱ	
				<u> </u>	<u> </u>	FL : 24 Coo		
11. Pursuant to	lo the provisions of Sections 60 adistered agent, or both, in the	7.0502 and 607.1508, Florida Statu State of Florida, Such change was	utes, the a authorize	yoda Id be	e-named corp the corpora	rporation submits this statement for the purpose of changing its register ation's board of directors. I hereby accept the appointment as register	ed	
agent. La	m familiar with, and accept the	obligations of, Section 607.0505, F	lorida Sta	lutes	3.	, and a separate of the separa		
SIGNATURE	Signature, typed or printed name of registor	red arrest and title diagnolicable (MC	NF: Banister	ed Ana	nt cionature requi	uired when reinstating) DATE		
12.		S AND DIRECTORS	13.		W. C. S. Land of P. C.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ᅱ	
TITLE	D	☐ DELETE	1.1 T			The second of th	tition	
NAME	Paxson, Devon		128	AME			- >	
STREET ADDRESS	231 BRADLEY PLACE, S	TE 204	135	TRFCT	ADDRESS	-03/20/9801094001	, I	
CITY-ST-ZIP	PALM BEACH FL 33480		J	HTY-S	J	***1650.00 ****150.00	'	
TITLE	D	DELETE	2.11		1-211	Change Ado	dition	
NAME	PAXSON, ROSLYCK			IAME	1			
STREET ADDRESS	231 BRADLEY PLACE, S	TE 204			ADDRESS			
ĺ	PALM BEACH FL 33480	,	•		ſ		- 1	
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NAME				LAME			ļ	
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NAME			4.21	NAME			1	
STREET ADDRESS			4.3 S	TREET	ADDRESS			
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NAME			5.2 N	AME	j			
STREET ADDRESS			5.3 \$	TREET	ADDRESS	~		
CITY-ST-ZIP			5.4 0	ITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 T	ITLE		Change Add	lition	
NAME			6.2 N	AME		M_{ν}		
STREET ADDRESS			6.3 S	TREET	ADDRESS	\ <i>\\pu</i> \		
CITY-ST-ZIP			640	ITY-S	T- 71P	71V,) Y		

14. 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 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 if changed, or on an attachment with an address.

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