

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000063215**

1. Entity Name

D P MEDIA LICENSE OF ST. LOUIS, INC.**FILED**
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90195 038 ***150.00

Principal Place of Business

**231 BRADLEY PLACE
SUITE 204
PALM BEACH FL 33480**

Mailing Address

**400 NORTH ASHLEY DRIVE
SUITE 2300
TAMPA FL 33602**

2. Principal Place of Business

601 Clearwater Park Road

Suite, Apt. #, etc.

3. Mailing Address

601 Clearwater Park Road

Suite, Apt. #, etc.

C0058363

DO NOT WRITE IN THIS SPACE

City & State
West Palm Beach, FloridaCity & State
West Palm Beach, Florida4. FEI Number **65-0769776**

Applied For

Not Applicable

Zip
33401-6233

Country

Zip
33401-6233

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE
SUITE 3000
MIAMI FL 33131-3209**

7. Name and Address of New Registered Agent

Name

William L. Watson

Street Address (P.O. Box Number is Not Acceptable)

601 Clearwater Park Road

City

West Palm Beach**FL**

Zip Code

33401-6233

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PAXSON, DEVON
231 BRADLEY PLACE, STE 204
PALM BEACH FL 33480** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PAXSON, ROSLYCK
231 BRADLEY PLACE, STE 204
PALM BEACH FL 33480** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DC
Paxson, Lowell W.
601 Clearwater Park Road
West Palm Beach, Florida 33401-6233** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Sagansky, Jeffrey
601 Clearwater Park Road
West Palm Beach, Florida 33401-6233** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/T
Severson, Thomas E. Jr.
601 Clearwater Park Road
West Palm Beach, Florida 33401-6233** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/AS
Morrison, Anthony L.
601 Clearwater Park Road
West Palm Beach, Florida 33401-6233** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
Weinstein, Adam K.
601 Clearwater Park Road
West Palm Beach, Florida 33401-6233** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Watson, William L.
601 Clearwater Park Road
West Palm Beach, Florida 33401-6233** ☒ Change ☐ Addition

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 4/18/01

Date

Daytime Phone #

CR2E034 (10/00)