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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700064089

D P MEDIA OF PANAMA CITY, INC.

Principal Place of Business	Mailing Address	7-03
231 BRADLEY PLACE SUITE 204 PALM BEACH FL 33480	400 NORTH ASHLEY DRIVE. #2300 TAMPA FL 33602	
Delegional Disease of Designation	Mailton Addison	

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231 BRADLEY 1	PLACE	400 North Ashley Drive. Tampa FL 33602	#2300		1		
PALM BEACH I	FL 33480				DO NOT WRITE IN THIS S	SPACE	
					3. Date incorporated or Qualifed	-	
į					07/24/1997		
2. Principal P	Place of Business	Za. Mailing Address		·= · · ·	4, FEI Number	App	lied For
21		26			65-0773609	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 A	
22	:	27		•	5. Certificate of Status Desired	Fee Rec	
City & Stat	le	City & State	·		6. Election Campaign Financing	\$5.00 N	Mary Bo
23	•	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	,	8. This corporation owes the current year Intal		7.003
24	25		10				□no İ
	9. Name and Address of Curre			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered A		-110
	= 4.50./		81	Name	10.	30.10	
INTE	RASTATE REGISTERED AGENT (CORPORATION	Į.				
	BRICKELL AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
(TE 3000		-	 _			
1	MI FL 33131-3209		83	}	* ***		•
INITAL I	MI 1 L 35131-3209		84	City		85 Zip C	ode
}			{ }	1 0,	FL		1
11. Pursuant	to the provisions of Sections 607,050	02 and 607.1508, Florida Statutes	, the above	-named cor	rporation submits this statement for the purpose of c	hanging its r	egistered
agent la	registered agent, or both, in the State am familiar with, and accept the oblica	of Florida. Such change was aut	horized by ta Statutes	the corporal	tion's board of directors. I hereby accept the appoint	ment as reg	istered
	,	anano an august, au lagge, 1 loin		•	- 7 · .		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: F	tegistered Agen	it signature requi	red when reinstating) DATE		 .
12.	OFFICERS AL	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	D	🔲 DELETE				Change	☐ Addition
,		🔲 DELETE	1.1 TILE			Change	☐ Addition
NAME	PAXSON, DEVON	🔲 DELETE	1.1 TITLE . 1.2 NAME	Anneces	200002752	Change	Addition
NAME STREET ADDRESS	PAXSON, DEVON 231 BRADLEY PLACE #204	·· [] DELETE	1.1 TITLE 1.2 NAME 1.3 STREET	ĺ	200002752 -01/22/990	□Change 232- 1114(□ Addition
NAME STREET ADDRESS CITY-ST-ZIP	PAXSON, DEVON 231 BRADLEY PLACE #204 PALM BEACH FL 33480		1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST	ĺ	200002752 -01/22/990	□Change 232- 1114(□ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	PAXSON, DEVON 231 BRADLEY PLACE #204 PALM BEACH FL 33480 D	·· [] DELETE	1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE	ĺ	200002752	□Change 232- 1114(□ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PAXSON, DEVON 231 BRADLEY PLACE #204 PALM BEACH FL 33480 D PAXSON, ROSLYCK		1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME	T-ZIP	200002752 -01/22/990	□Change 232- 1114(□ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	PAXSON, DEVON 231 BRADLEY PLACE #204 PALM BEACH FL 33480 D PAXSON, ROSLYCK 231 BRADLEY PLACE #204		1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE	T-ZIP	200002752 -01/22/990	□Change 232- 1114(□ Addition
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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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP