2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000011306

Entity Name: PAXSON MILWAUKEE LICENSE, INC.

FILED Apr 03, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	WATER PARK M BEACH, FL							
Current Mailing Address:			N	New Mailing Address:				
	WATER PARK M BEACH, FL							
FEI Number: 65-0817050 FEI Number Applied For () FEI			FEI Numbe	Imber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
601 CLEAR	WILLIAM L ESO WATER PARK M BEACH, FL							
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.								
SIGNATUR	E:							
	Electronic	Signature of Registered Agen	t				Date	
Election Cam	paign Financing	Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PAXSON, LOWE 601 CLEARWAT		Ni Ad	itle: ame: ddress: ity-St-Zip:	D BURGESS, R 601 CLEARV WEST PALM	VATER PARK	ROAD	
Title: Name: Address: City-St-Zip:	BURGESS, R. BI 601 CLEARWAT		Ni Ad	itle: ame: ddress: ity-St-Zip:	,	()Change() Addition	
Title: Name: Address: City-St-Zip:	BURGESS, R. BI 601 CLEARWAT		Ni Ad	itle: ame: ddress: ity-St-Zip:	,	()Change() Addition	
Title: Name: Address: City-St-Zip:	V/AS () [WEINSTEIN, AD/ 601 CLEARWAT WEST PALM BE	AM K	N: A:	itle: ame: ddress: ity-St-Zip:	,	() Change() Addition	
Title: Name: Address: City-St-Zip:	WATSON, WILLI 601 CLEARWAT		N: Ac	itle: ame: ddress: ity-St-Zip:	,	()Change() Addition	
Title: Name: Address: City-St-Zip:	GARCIA, RICHAR 601 CLEARWAT		Ni Ad	itle: ame: ddress: ity-St-Zip:	,	()Change() Addition	

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 04/03/2008