

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 16, 2001 08:00 AM**
Secretary of State**DOCUMENT # P99000017359**1. Entity Name
PAXSON COMMUNICATIONS OF JACKSONVILLE-35, INC.

Principal Place of Business	Mailing Address
601 CLEARWATER PARK ROAD	601 CLEARWATER PARK ROAD
WEST PALM BEACH FL 334016233	WEST PALM BEACH FL 334016233

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

4. FEI Number
65-0922580Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WATSON WILLIAM L
601 CLEARWATER PARK ROAD

WEST PALM BEACH FL 334016233

7. Name and Address of New Registered Agent

Name

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

City

FL Zip Code

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 _____ **04/16/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	☐ Delete
NAME	GAMACHE KENNETH M	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE	VP	☒ Change ☐ Addition
NAME	WEINSTEIN ADAM K	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE	S	☐ Delete
NAME	WATSON WILLIAM L	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VPAS	☐ Delete
NAME	MORRISON ANTHONY L	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VPT	☐ Delete
NAME	GROSSMAN SETH A	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE	VPT	☒ Change ☐ Addition
NAME	SEVERSON THOMAS EJ	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE	P	☐ Delete
NAME	SAGANSKY JEFFREY	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DC	☐ Delete
NAME	PAXSON LOWELL W	
STREET ADDRESS	601 CLEARWATER PARK ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 334016233	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: WILLIAM L. WATSON

S

04/16/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

RONALD L. RUBIN - VP
601 CLEARWATER PARK ROAD
WEST PALM BEACH, FL 334016233