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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 98 MAR 20 PM 1:13 DOCUMENT #
1. Corporation Name V28675 (9) SECRETARY OF STATE TALLAHASSEE. FLORIDA D P MEDIA, INC. Principal Place of Business Mailing Address **601 CLEARWATER PARK ROAD 601 CLEARWATER PARK ROAD** WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3227378 400 N. Ashley Dr 231 Bradley Place 26 Not Applicable Suite, Apt. #, etc.
Suite 2300 **\$8.75** Additional Suite 204 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Palm Beach, Tampa, 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 33480 33602 24 25 29 30 Personal Property Tax due June 30. Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PAXSON, DEVON **601 CLEARWATER PARK ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33401 83 City 84 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signalure, typed or pricted name of riigistered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. **VPD**T TITLE DELETE Change Addition 1.1 TITLE PAXSON, DEVON NAME 1.2 NAME 700002468677<sub>015</sub> -03/26/98--01012-015 601 CLEARWATER PARK ROAD STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33401-6233 CITY-ST-ZIP 1.4 CITY-ST-ZIP 本本本本方[][]。[][] 图标编编记[SIII] [Begition DELETE TITLE 2.1 TITLE PAXSON, ROSLYCK NAME 2.2 NAME **601 CLEARWATER PARK ROAD** STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33401-6233 CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY - ST - ZIP 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 truetee 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.