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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996	CONT.	F CORPORATIONS		
DOCUMENT # G66	6412 (9)			
WINSTANLEY BROADCASTIN	NG, INC.		 	(# 118) #18)( 8)#14 818)( 8)814 8)80)   8)#18]
Principal Place of Business	Mailing Address			
101 MARINERS ISL P.O. BOX 4990 MANDEVILLE LA 70448	101 MARINERS ISL MANDEVILLE LA 704 US	48		
US	00		3. Date Incorporated or Qualified 10/18/1983	3a. Date of Last Report 04/26/1995
2. Principal Place of Business	2a. Mailing Address 26		4. FEI Number 74-2288431	Applied For Not Applicabl
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip Country	Zip	Country	8. This corporation has liability for i	intangible tax under s 199.032,
25 25 9. Name and Address of C	29 Current Registered Agent	30	Florida Statutes Yes  10. Name and Address of New R	No legislered Agent
O'BRIEN, JOHN D. 929 JENKS AVENUE PANAMA CITY FL 32401		83	dress (P.O. Box Number is Not Acceptab	
		84 City		FL 85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 607 or registered agent, or both, in the State of familiar with, and accept the obligations of</li> </ol>	of Florida. Such change was authoriz	zed by the corporation's boa	oration submits this statement for the pur and of directors. I hereby accept the appo	pose of changing its registered officions of the position of t
or registered agent, or both, in the State of familiar with, and accept the obligations of IGNATURE  Signature typed or printed name of registers  2. OFFICEF	of Florida. Such change was authorized, Section 607.0505, Florida Statutes  ed agont and title if applicable. (NO	zed by the corporation's box S. DTE: Registered Agent signature requir	ard of directors. I hereby accept the appo	ointment as registered agent. I am  DATE ICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of familiar with, and accept the obligations of SIGNATURE  Signature, typed or printed name of register.  2. OFFICEF  TILE DVP  WINSTANLEY, CARLIE	of Florida. Such change was authorized, Section 607,0505, Florida Statutes  od agont and bite if applicable. (NC  RS AND DIRECTORS  DELETE  B	DTE: Registered Agent signature requirements  13.  1.1 Title  1.2 NAME	ard of directors. I hereby accept the appointment of directors.	pintment as registered agent. I am
or registered agent, or both, in the State of familiar with, and accept the obligations of IGNATURE.  Signature, typed or printed name of registers.  OFFICEF  TILE  DVP  WINSTANLEY, CARLIE  HEET ADDRESS  101 MARINERS ISLANCE	of Florida. Such change was authorized, Section 607,0505, Florida Statutes  od agont and bite if applicable. (NC  RS AND DIRECTORS  DELETE  B	DTE: Registered Agent signature requirements  13.  1.1 TitlE  1.2 NAME  1.3 STREET ADDRESS	ard of directors. I hereby accept the appointment of directors.	ointment as registered agent. I am  DATE ICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of familiar with, and accept the obligations of IGNATURE  Signature, typed or printed name of registers  OFFICEF  DVP  WINSTANLEY, CARLIE  101 MARINERS ISLANT  IY-SI-ZIP  MANDEVILLE LA	of Florida. Such change was authorized, Section 607,0505, Florida Statutes  od agont and bite if applicable. (NC  RS AND DIRECTORS  DELETE  B	DTE: Registered Agent signature requirements  13.  1.1 Title  1.2 NAME	ard of directors. I hereby accept the appointment of directors.	DATE  DATE  DATE  ICERS AND DIRECTORS IN 12  Change Addition
or registered agent, or both, in the State of familiar with, and accept the obligations of IGNATURE  Signature typed or printed name of registered.  OFFICEF  TLE  DVP  WINSTANLEY, CARLIE  101 MARINERS ISLANT  MANDEVILLE LA  DP  WINSTANLEY, CHARLE  HEET ADDRESS  101 MARINERS ISLANT  WINSTANLEY, CHARLE  HEET ADDRESS  101 MARINERS ISLANT	of Florida. Such change was authorized, Section 607.0505, Florida Statutes  od agent and bite if applicable. (INC  RS AND DIRECTORS  DELETE  B  D  DELETE  E\$ K.	DTE: Registered Agent signature requirements  13.  1.1 Title  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP	ard of directors. I hereby accept the appointment of directors.	DATE  DATE  DERS AND DIRECTORS IN 12  Change Addition
or registered agent, or both, in the State of familiar with, and accept the obligations of IGNATURE  Signature: typed or printed name of registere  2. OFFICEF  ILE DVP  WINSTANLEY, CARLIE  101 MARINERS ISLAND  ILE DP  WINSTANLEY, CHARLE  ILE DP  WINSTANLEY, CHARLE  ILE DP  WINSTANLEY, CHARLE  ILE UNINSTANLEY, CHARLE  ILE WINSTANLEY, CHARLE  ILE ADDRESS  101 MARINERS ISLAND  MANDEVILLE LA  MANDEVILLE LA	of Florida. Such change was authorized, Section 607,0505, Florida Statutes.  IN RS AND DIRECTORS  DELETE  B D  DELETE  B D	22 A STREET ADDRESS 2.4 CITY-ST-ZIP 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ard of directors. I hereby accept the appointment of directors.	DATE  ICERS AND DIRECTORS IN 12  Change Addition
or registered agent, or both, in the State of familiar with, and accept the obligations of GNATURE  Signature, typed or printed name of registere.  Popular Winstanley, Carlie Winstanley, Carlie OP Winstanley, Carlie 101 Mariners Islant MANDEVILLE LA DP WINSTANLEY, CHARLE ADDRESS 101 MARINERS ISLANT WINSTANLEY, CHARLE 101 MARINERS ISLANT WINSTANLEY, CHARLE MANDEVILLE LA LE	of Florida. Such change was authorized, Section 607.0505, Florida Statutes  od agent and bite if applicable. (INC  RS AND DIRECTORS  DELETE  B  D  DELETE  E\$ K.	22 NAME 2.3 STREET ADDRESS 2.1 STREET ADDRESS 2.2 NAME 2.3 STREET ADDRESS 2.1 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.5 STREET ADDRESS 4.4 CITY-ST-ZIP 3.5 STREET ADDRESS 4.5 STREET ADDRESS 5.5 STREET ADDRESS	ard of directors. I hereby accept the appointment of directors.	DATE  DATE ICERS AND DIRECTORS IN 12  Change Addition  Change Addition
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or registered agent, or both, in the State of familiar with, and accept the obligations of GNATURE  Signature: typed or printed name of register.  C. OFFICER  DVP  WINSTANLEY, CARLIE  HEEL ADDRESS  IY-SI-ZIP  ME  WINSTANLEY, CHARLE  DP  WINSTANLEY, CHARLE  INSTANLEY, CHARLE  HEEL ADDRESS  IY-SI-ZIP  MANDEVILLE LA  LE  MH  REET ADDRESS  IY-SI-ZIP	of Florida. Such change was authorized, Section 607,0505, Florida Statutes.  IN RS AND DIRECTORS  DELETE  B D  DELETE  B D	22 NAME 2 NAME 2 NAME 2 NAME 2 NAME 2 NAME 2 NAME 3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ard of directors. I hereby accept the appointment of directors.	DATE  DATE ICERS AND DIRECTORS IN 12  Change Addition  Change Addition
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SIGNATURE: SIGNATURE AND TYPE

46 504-626-4483

CR2E034 (12/95)