

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739617

**Entity Name:** FLORIDA PUBLIC BROADCASTING SERVICE, INC.

**FILED**  
**Mar 14, 2016**  
**Secretary of State**  
**CC4230827598**

**Current Principal Place of Business:**

600 1ST AVENUE N  
306  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

P.O. BOX 1691  
ST. PETERSBURG, FL 33731-1691

**FEI Number: 59-2085219**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

RIGHTER, JANYTH  
600 1ST AVENUE N  
SUITE 306  
ST. PETERSBURG, FL 33701 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title ED  
Name RIGHTER, JANYTH  
Address 600 1ST AVENUE N, STE. 301  
City-State-Zip: ST. PETERSBURG FL 33701

Title VC  
Name SUKHDEO, DELORES  
Address 14901 NE 20TH AVENUE  
City-State-Zip: MIAMI FL 33181

Title CHAIRMAN  
Name JOHNSON, RICK  
Address 10501 FGCU BLVD S  
City-State-Zip: FT MYERS FL 33965

Title AT LARGE  
Name CRAWFORD, PAT  
Address 1000 UNIVERSITY PKWY  
City-State-Zip: PENSACOLA FL 32514

Title SECRETARY  
Name OLIVER, LAFONTAINE  
Address 11510 E COLONIAL DRIVE  
City-State-Zip: ORLANDO FL 32817

Title TREASURER  
Name WRIGHT, RANDALL  
Address UNIVERSITY OF FLORIDA  
2200 A WEIMER HALL  
City-State-Zip: GAINESVILLE FL 32611

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JANYTH RIGHTER**

**EXECUTIVE DIRECTOR**

**03/14/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date