

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000084125

**Entity Name:** BLACK TELEVISION NEWS CHANNEL, LLC

**Current Principal Place of Business:**

2941 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309-6825

**Current Mailing Address:**

2941 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309-6825 US

**FEI Number:** 59-3805082

**Certificate of Status Desired:** No

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

BRILLANTE, ROBERT JMGR  
2941 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309-6825 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

**Authorized Person(s) Detail :**

Title MGR  
Name BRILLANTE, ROBERT J  
Address 2941 KERRY FOREST PARKWAY  
City-State-Zip: TALLAHASSEE FL 32309-6825

Title VPGM  
Name WATSON, FRANKLIN  
Address 2941 KERRY FOREST PARKWAY  
City-State-Zip: TALLAHASSEE FL 32309-6825

Title MGR  
Name WATTS, JR., J CCHAIRMA  
Address 300 NEW JERSEY AVE, NW  
SUITE 650  
City-State-Zip: WASHINGTON DC 20001

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT J BRILLANTE

MGR

04/16/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date