#### 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084125

Entity Name: BLACK NEWS CHANNEL, LLC

**FILED** Jan 25, 2021 **Secretary of State** 4424496121CC

## **Current Principal Place of Business:**

2320 KILLEARN CENTER BLVD

BLDG D

TALLAHASSEE, FL 32309-3524

#### **Current Mailing Address:**

2320 KILLEARN CENTER BLVD **BLDG D** 

TALLAHASSEE, FL 32309 US

FEI Number: 59-3805082 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

CLIFTON, MARCUS ANTOINE 2320 KILLEARN CENTER BLVD BLDG D

TALLAHASSEE, FL 32309-3524 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: MARCUS A. CLIFTON 01/25/2021

> Date Electronic Signature of Registered Agent

# Authorized Person(s) Detail:

Title PRESIDENT AND CEO Title VP OF FINANCE Name HAIR, PRINCELL Name BROWN, MAUREEN

2320 KILLEARN CENTER BLVD 2320 KILLEARN CENTER BLVD Address Address BLDG D

BLDG D

City-State-Zip: TALLAHASSEE FL 32309-3524 City-State-Zip: TALLAHASSEE FL 32309-3524

Title **CHAIRMAN** Title COO

Name WATTS, JR., JC Name ZERWEKH, JAMES

Address 2320 KILLEARN CENTER BLVD Address 2320 KILLEARN CENTER BLVD

BLDG D BLDG D

City-State-Zip: TALLAHASSEE FL 32309-3524 City-State-Zip: TALLAHASSEE FL 32309-3524

Title SVP AND GENERAL COUSNEL CLIFTON, MARCUS ANTOINE Name 2320 KILLEARN CENTER BLVD Address

BLDG D

City-State-Zip: TALLAHASSEE FL 32309-3524

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: MARCUS ANTOINE CLIFTON

SVP AND GENERAL COUNSEL

01/25/2021