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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

**DOCUMENT # 192806** 

(8)

1. Corporation Name SUNSHINE STATE BROADCASTING COMPANY, INC.  Principal Place of Business Mailing Address 2600 1ST ST W. 5603 26TH ST W								
P O BOX 240 BRADENTON FL			BRADENTON FL 34207-3516					
					3. Date Incorporated or Qualifie 04/30/1956	04/11/1996		
2. Principal Place of Business		28. Mailing Addr	2a. Mailing Address		4. FEI Number 59-0812476	<del></del>	Applied For Not Applicable	
Suite, Apt. #, etc.			Suite. Apt. #, etc.			£0.75	Additional	
22		27			5. Certificate of Status Desired	1	Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	0 May Be	
23	28		T 02-11-1		Trust Fund Contribution		d to Fees	
Zip	Country Zip		Countr 30	8. This corporation has liability for intangible tax under s. 19 Florida Statutes  Yes  No		s. 199.032,		
24	25   9, Name and Address of Curr	29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	[30]		10. Name and Address of New			
NFI S	SON, ROBERT R.	·	81	Nam <b>Robe</b>	ert R. Nelson			
7824 BROADMOOR PINES BD					ress (P.O. Box Number is Not Accep	ytable)		
SARASOTA FL 34243			82	1452	Hillview	natie)		
			83					
			84	City		<b>85</b> Zip	Code	
				Sara	isota	PL 34	239	
11. Pursuant t office or re	o the provisions of Sections 607.0 eaistered agent, or both, in the Sta	502 and 607.1508, Florid ite of Florida. Such chan	la Statutes, the abov de was authorized b	re-named corp or the corporat	poration submits this statement for the tion's board of directors. I hereby ac	e purpose of changing cept the appointment a	its registered is registered	
agent Lar	n familiar with, and accept the obl	ligations of, Section 607.	5505, Florida Statute	S.	<b>3</b>	27-87		
SIGNATURE	Signal keil typed or politied name of registered.	agent and title if applicable.	(NOTE: Flegislered Ag	and timesture requir		DATE		
12.	and the same of th	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTO	RS IN 12	
TITLE	PS DELETE NELSON, ROBERT R.		LETE 1.1 TITLE			Change	Addition	
NAME			1.2 NAME					
STREET ADDRESS			1.3 STREE	1 ADDRESS			,	
CHY+\$1+74P	SARASOTA FL VT X DELETE		1.4 CITY-	ST-ZIP		— Па	1.488	
TITLE	VT TODD, CHRISTINE		1			L Change	☐ Addition	
NAME	5120 37TH ST EAST		2.2 NAME	1				
STREET ADDRESS	BRADENTON FL		23 STREET ADD 2 4 City - St - Z					
COY-SI-Z-P TITLE	DELETE			51-21	***************************************	Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3 3 STAE6	T ADDRESS				
CITY-ST-ZIP			3 4. CITY	ST-ZIP				
TITLE		☐ DE	LETE 4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAMI					
STREET ADDRESS				T ADDRESS				
C(1Y - S1 - 2IP		T N	4.4 CITY-	ST-ZIP		- Ch	Addition	
TIFLE		☐ DE				Change	Addition	
NAME STREET ADDRESS			5.2 NAME	T ADDRESS				
CHY-ST-7IP			5.4 CITY-					
TITLE	DELETE			<u> </u>	Change		Addition	
NAME		<del></del> ·	6.2 NAME			₽	• •	
STREET ADDRESS				T ADDRESS				
Crfy-S1-2iP			6.4 CiTY-					
14. Loo heret	by certify that the information supply indicated on this secural report of	lied with this filling does i	not qualify for the ex	emption stated	d in Section 119.07(3)(i), Florida Statemy signature shall have the same i	utes. I further certify that	at the	
Lam an of	fricer or director of the corporation a Block 12 or Block 13 if changed,	or the receiver or trustee	empowered to exe	cute this repor	rt as required by Chapter 607, Florid	la Statutes; and that my	'name	

SIGNATURE:

KOWN THE SIGNING OFFICER OF DIRECTOR

2/11/97

Daytime Phone #

**FILED** 

Mar 04 1997 8:00am

Secretary of State