

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Montem
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 219671 (5)
1. Corporation Name
SARASOTA-CHARLOTTE BROADCASTING CORPORATION



Principal Place of Business: 469 YACHT HARBOR DRIVE
OSPREY FL 34229
Mailing Address: 469 YACHT HARBOR DRIVE
OSPREY FL 34229

2. Principal Place of Business: 21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25
2a. Mailing Address: 26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: 01/28/1959
3a. Date of Last Report: 06/21/1995
4. FEI Number: 59-1059330
Applied For: Not Applicable
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes: ☐ Yes ☐ No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

EWING, E J
469 YACHT HARBOR DRIVE
OSPREY FL 34229

81. None
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

Date

12. OFFICERS AND DIRECTORS

1. TITLE: P
NAME: EWING, E J
STREET ADDRESS: 469 YACHT HARBOR DRIVE
CITY-ST-ZIP: OSPREY FL 34229
2. TITLE: D
NAME: EWING, E J JR.
STREET ADDRESS: 4496 HORSESHOE BEND
CITY-ST-ZIP: MURRELLS INLET SC 29576
3. TITLE: STD
NAME: EWING, PATRICK M
STREET ADDRESS: 1126 CASTLEMAY CIRCLE
CITY-ST-ZIP: DUNEDIN FL 34698
4. TITLE: 3425 S.R. 590 #2824
NAME: Clearwater, FL 34619
5. TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
6. TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: ☐ Change ☐ Addition
2. NAME: ☐ Change ☐ Addition
3. STREET ADDRESS: ☐ Change ☐ Addition
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4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, I or my authorized agent, in an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)