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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500000344

BEASLEY BROADCASTING OF SOUTHWEST FLORIDA. INC.

| | | | | | | BRIEF BREIT BRIEF BRIEF | , | |
|----------------------------------------------------|------------------------------------------------|---------------------------------|--------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|----------------------------------------|
| Principal Place of Business Mailing Address | | | | | | | | • |
| | DRIVE. SUITE 200 | | ra orive. Suite 200 | | | | | |
| NAPLES FL 33 | 940 | NAPLES FL | . 33940 | . DO NO | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | | 3 SPACE | |
| | · . | * | | | 3. Date Incorporated or Qu | allied | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 01/23/1995 | | | |
| | | ` | 2a. Mailing Address ☐ | | 4. FEI Number | | } | plied For |
| 21 26 Suite All # State | | | A_4 # _+- | | 65-0549984 | | | t Applicable |
| Suite, Apt. #, etc Suite, Apt. #, etc | | | Apt. #, etc | | 5. Certificate of Status Des | ired | \$8.75 | |
| 22 | A | 27 | 01-4- | | · · · · · · · · · · · · · · · · · · · | • | Fee Re | • • • |
| City & State | | | City & State | | 6. Election Campaign Fina | ncing ' | \$5.00 | |
| 23 | C | 28 | Cou | | Trust Fund Contribution | | Added t | o Fees |
| Zip | Country | | | nury | 8. This corporation owes the | ie current year Ir | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax. | | Yes | □No |
| - | 9. Name and Address of Cu | rrent Registered A | gent ", | 81 Name | 10. Name and Address of | New Registered | 1 Agent | |
| THE | PRENTICE-HALL CORPORAT | | | Name | | • | | |
| 1201 HAYS STREET, SUITE 105 | | | 1.4707 11.0 | 82 Street A | dress (P.O. Box Number is Not Acceptable) | | | |
| TALLAHASSEE FL 32301 | | | | | 4 ** ** * * * * * * * * * * * * * * * * | | | ***** ******************************** |
| IAL | LATAGOLL I L 3230 I | | | 83 | | | | |
| | • | | | 84 City | 2 4 4 5 5 6 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 | A 10 12 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | 85 Zip (| Code |
| morph etc., e.g., | etter og et i der skrivere for i der | 3 3 66 | 4.1 | | | FI | ∟ •• | |
| 11. Pursuant | to the provisions of Sections 607. | .0502 and 607.1508 | Florida Statutes, the at | ove-named o | corporation submits this statement ration's board of directors. I hereby | or the purpose o | f changing its | registered |
| agent. I a | am familiar with, and accept the ob | oligations of, Section | 607.0505, Florida Statu | ites. | ration's board of directors, i nereby | accept the appo | onument as reg | Jistereu |
| SIGNATURE | | | • | | | | | |
| OIOIVATORE | Signature, typed or printed name of registered | d agent and title if applicable | . (NOTE: Registered | Agent signature re | quired when reinstating), r | DATE | - | |
| 12. | | AND DIRECTORS | 13. | | ADDITIONS/CHANGES | O OFFICERS A | ND DIRECTO | RS IN 12 |
| TITLE . | CEOT | | ☐ DELETE 1.1 TIT | LE | F7 (414) (384) | | ☐ Change | ☐ Addition |
| NAME | BEASLEY, GEORGE G | | 1.2 NA | ME. | • | | | |
| STREET ADDRESS | | 200 | 1.3 ST | REET ADDRESS | • | | | |
| CITY-ST-ZIP | NAPLES FL | | 1.4 CIT | Y-ST-ZIP | | | | |
| TITLE | PD | | · □ DELETE 2.1 T/T | lE | | | Change | Addition |
| NAME | BEASLEY, BRUCE G | | 2.2 NA | ME | | i | | |
| STREET ADDRESS | 3033 RIVIERA DRIVE, SUITE | 200 | 2.3 STI | REET ADDRESS | • | • | | |
| CITY-ST-ZIP | NAPLES FL | | - 2.4 CT | TY-ST-ZIP | | | • | |
| TITLE | VPD | The first ten to be the second | ☐ DELETE 3.1 TIT | + | | | ☐ Change | Addition |
| NAME | BEASLEY, SHIRLEY W | | 3.2 NA | ME | | | | |
| STREET ADDRESS | | 200 | 33.50 | REET ADDRESS | 4 *: | is given a serve | There a | religion i con liberti |
| CITY-ST-ZIP | NAPLES FL | | | TY-ST-ZIP | المراجعة ا المراجعة المراجعة ال | | | |
| TITLE | SD | • | DELETE 4,1 TIT | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ☐ Change ≺ | Addition |
| | BEASLEY, CAROLINE | | 4. 2 NA | | | | | |
| NAME STREET ADDRESS | | | | REET ADORESS | | | | , |
| • | NAPLES FL | 1/2 * " | | 1 | | | | |
| CITY-ST-ZIP | VPD | | DELETE 5.1 TITI | Y-ST-ZIP | | | ☐ Change | Addition |
| NAME . | BEASLEY, BRIAN | | 5.2 NA | | o Billiot tank | | onange | |
| . ' | | | | REET ADDRESS | 7 11 1 W 14 25 2 | | | • |
| STREET ADDRESS | 1. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. | | 1 | | . N. 4. ∰ + A.1 | | | |
| CITY-ST-ZIP | NAPLES FL | | | Y-ST-ZIP | | | | Maria Salata |
| TITLE | TIME ALASM PORT OF THE | 154 | | - 1 | | | Change | Addition |
| NAME | WARLES FI | * * * * | 6.2 NAI | 1 | | | | |
| STREET ADDRESS | 1.0 10 3/3/437 - 3 | | ■ 6.3 STF | REET ADDRESS | | | | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90011 046 ***150.00