## 2005 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

## DOCUMENT # F95000000344

1. Entity Name BEASLEY BROADCASTING OF SOUTHWEST FLORIDA,



**FILED** Mar 07, 2005 08:00 AM Secretary of State

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· ·	ce of Business RA DRIVE, SUITE 200 34103	Mailing Address 3033 RIVIERA DRIVE, SUITE 20 NAPLES, FL 34103	0		ilio oili orii bali ori		ESEE IVIII SÜÜNI SÜÜNNEI II INNE
THE PRE	6. Name and Address of Current Re	E	02252005 4. FEI Number 65-0549 5. Certificate o	No Chg-P	CR2E(	Applied For Not Applicable  \$8.75 Additional Fee Required	
	SSEE, FL 32301	IN THIS SPACE					
signature.	named entity submits this statement for the close of registered agent.  Signature, typed or printed name of registered agent and the NOWILL FEE IS \$150.00 ay 1.2005 Fee will be \$550.00		Agent signature required		, in the State of Flo	rida, I am DATE	familiar with, and accept
AROFM				10 7688			
10,	OFFICERS AND DIF	ECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOT BEASLEY, GEORGE G 3033 RIVIERA DRIVE, SUITE 200 NAPLES, FL				U00000 03/07/05	 J25452	2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEASLEY, BRUCE G 3033 RIVIERA DRIVE, SUITE 200 NAPLES, FL				nov.011.02-	<u>.2007.3</u>	<u>-082 150.00</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BEASLEY, SHIRLEY W 3033 RIVIERA DRIVE, SUITE 200 NAPLES, FL			DO I	W TON	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BEASLEY, CAROLINE 3033 RIVIERA DRIVE #200 NAPLES, FL			IN T	HIS SP	ACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	VPD BEASLEY, BRIAN 3033 RIVIERA DRIVE #200 NAPLES, FL				The second secon	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Angel de la constante de la co	- ; »		==	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OF DIRECTOR

1263-5000