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 # F96867

RADIO A	IND ELECTRONIC COMMU	INICATIONS, INC.						**************************************	
Principal Plac	e of Business	Mailing Address				. 1891169 (118 19119 BILD) 1\$110	Britt 1881 PIPH 91	,,, 61611 61611 E	TE-1 GIGH 1991
30 industrial BLVD Pensacola Fl 32503 Pensacola Fl 32503						DO NOT WE	RITE IN THIS	SDACE	
								JEAUL .	 -
					- 1	Date Incorporated or Qualife	u		
2 Dringing D	those of Puninger	2a. Mailing Address				El Number		- I Ar	plied For
						9-2225749		<u> </u>	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						Certificate of Status Desired		\$8.75 Additional Fee Required	
22 27					6. 5	lection Campaign Financing		\$5.00	May Be
23 28					I	rust Fund Contribution	, \Box	Added t	-,
Zip	Country	Zip	Country	,	8. T	his corporation owes the cu	rrent year Inta	angible	. /
24	25	29 3	0			Personal Property Tax.		☐Yes	No
	9. Name and Address of Curr	ent Registered Agent			10. 1	lame and Address of New	Registered /		
			81	Name					
	DHAM, JR., JAMES ELMER		82	Street Ac	idress (P.0). Box Number is Not Accep	otable)		
8690-1 SCENIC HWY					<u> </u>	·			
PEN	SACOLA FL 32514		83						ĺ
			84	City		,	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	, the above	e-named co	orporation	submits this statement for th	e purpose of	changing its	registered
office or I	ro the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obligions.	e of Florida. Such change was aut	honzed by	the corpora	ation's boa	rd of directors. I hereby acc	ept the appoir	itment as re	gistered
SIGNATURE	Signature, typed or printed name of registered a	rent and title if applycable (NOTE: R	enistered Aner	nt signature requ	ured when rein	nstating)	DATE		[
12.		AND DIRECTORS	13.		IA	DDITIONS/CHANGES TO C	FFICERS AN	D DIRECTO	ORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	FORDHAM, JAMES ELMER JI	₹	1.2 NAME						
STREET ADDRESS	8690 SCENIC HWY		1.3 STREET	TADORESS					
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-S	T-ZIP			W.=		
TITLE	SDT DELETE 2.1		2.1 TITLE	2.1 TITLE				☐ Change	Addition
NAME	FORDHAM, GAYNELL		2.2 NAME						ļ
STREET ADDRESS	TREET ADDRESS 8690 SCENIC HWY			T ADDRESS					į
CITY-ST-ZIP	PENSACOLA FL		2.4 CITY-5	ST-ZIP			· · · · ·	<u></u>	
TITLE	☐ DELETE 3.1		3.1 TITLE					☐ Change	Addition
NAME			3.2 NAME						}
STREET ADDRESS			3.3 STREE	TADDRESS					[
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		· · · · · · · · · · · · · · · · · · ·		Change	Addition
TITLE		☐ DELETE	4.1 TITLE	1				☐ Change	L radiation
NAME			4. 2 NAME						
STREET ADDRESS				TADORESS]
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S	T-ZIP				Change	Addition
TITLE		□ Dereie	5.1 TITLE 5.2 NAME						
NAME			l	T ADDRESS					
STREET ADDRESS			5.4 CITY-S						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	, . <u></u>				Change	Addition
TITLE		_ 5	6.2 NAME					_, 5	_ ' '
NAME STREET ADDRESS			•	T ADDRESS]

CITY-ST-ZIP 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 dirporation 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 life empowered.

6.4 CITY-ST-ZIP

SIGNATURE

FILED

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90097 021 ***150.00