

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

CORPORATION
ANNUAL REPORT
1995



STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
FILED

DOCUMENT # **H65457**

(4)

5/1/95

1. Corporation Name

BESSINGER BROADCAST, INC..

RECEIVED
TALLAHASSEE, FLORIDA

Physical Name of Registered Agent

**% LARRY WAYNE BESSINGER
405 WILSON AVE.
SATELLITE BEACH FL 32937**

Mailing Address

**% LARRY WAYNE BESSINGER
405 WILSON AVE.
SATELLITE BEACH FL 32937**

(Do not write in this space)

3. Date of Organization or Creation 07/03/1985	3a. Date of Last Report 05/01/1994
4. FID Number 59-2556508	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. 199.032, Florida Statutes. ☐ Yes ☒ No	

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

9. Name and Address of Current Registered Agent

**BESSINGER, LARRY WAYNE
405 WILSON AVE.
SATELLITE BEACH FL 32937**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 197, 198, and 199, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office (principal place of business) in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 197, Florida Statutes.

SIGNATURE

(Signature of person making change to registered office)

(Signature of New Agent, upon registration only)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PDS BESSINGER, LARRY WAYNE 405 WILSON AVE. SATELLITE BEACH FL	1. NAME	☐ Change ☐ Addition
STREET ADDRESS	405 WILSON AVE. SATELLITE BEACH FL	2. NAME	☐ Change ☐ Addition
CITY	SATELLITE BEACH FL	3. NAME	☐ Change ☐ Addition
STATE	FL	4. NAME	☐ Change ☐ Addition
ZIP	32937	5. NAME	☐ Change ☐ Addition
NAME	BESSINGER, DONALD JOHN 405 WILSON AVE. SATELLITE BEACH FL	6. NAME	☐ Change ☐ Addition
STREET ADDRESS	405 WILSON AVE. SATELLITE BEACH FL	7. NAME	☐ Change ☐ Addition
CITY	SATELLITE BEACH FL	8. NAME	☐ Change ☐ Addition
STATE	FL	9. NAME	☐ Change ☐ Addition
ZIP	32937	10. NAME	☐ Change ☐ Addition
NAME	BESSINGER, BERENDA ROSE 405 WILSON AVE. SATELLITE BEACH FL	11. NAME	☐ Change ☐ Addition
STREET ADDRESS	405 WILSON AVE. SATELLITE BEACH FL	12. NAME	☐ Change ☐ Addition
CITY	SATELLITE BEACH FL	13. NAME	☐ Change ☐ Addition
STATE	FL	14. NAME	☐ Change ☐ Addition
ZIP	32937	15. NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is accurately furnished and true; that I qualify for this registration under the laws of the State of Florida; that I further certify that the information included on this annual report or supplemental annual report is true and accurate; that my signature shall have the same legal effect as if made in person; that I am an officer or director of this corporation or the receiver or liquidator empowered to execute this report as required by Chapter 197, Florida Statutes; and that my name appears in Block 1 of the Block 1 of changes or as an attachment with an address.

SIGNATURE: *Larry Bessinger* *Larry Bessinger*
SIGNATURE AND TYPE IN FULL NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

(Type in Block 1)