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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # H65457

(4)

FILED							
May 11 1998 8:00am							
Secretary of State							

BESSI	INGER BROADCAST, INC)]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]
Principal Plac	ce of Business	Mailing Address			1 ARBERTE BEING BEINGE BITEL BERTE FORE BITEL	01877 (1871 B)(11 11811 B)(11 11811
% LARRY WAYNE BESSINGER % LARRY WAYNE BESSINGER						
405 WILSON AVE. 405 WILSON AVE.			On TOLIT		:	_
SATELLITE BEACH FL 32937		SATELLITE BEACH FL 32937			DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified	
5 5 (2 2 2 2 1 5	District District Control	. T			07/03/1985	
<u> </u>		2a. Mailing Address			4. FEI Number	Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			 	59-2556508	Not Applicable	
22 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State			6. Election Campaign Financing	
28				Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Ζφ	Cor	uniry	8. This corporation owes or has paid the	
24	25	29	30	•	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curren				10. Name and Address of New Register	
Ri	ESSINGER, LARRY WAYNE			81 Name		
405 WILSON AVE. SATELLITE BEACH FL 32937			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
			SINGUL MOD	1990 ti .O. Dox Mulliper is Mot Mccehtable)		
.				83		
				100		- - - - - - - - - -
				84 City		85 Zip Code
agent. I a	am familiar with, and accept the obligation of its polaries against Signature, typed or posited name of its polaries again.			lutes. d Agent signalure requi	poration submits this statement for the purposition's board of directors. I hereby accept the accep	
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
TITLE	PDS	DELFTE	1.1 ĭ	TLE		Change Addition
NAME	BESSINGER, LARRY WAYNE		1.2 N	AME		•
STREET ADDRESS	405 WILSON AVE.		1.3 \$	TREET ADDRESS		
CITY-ST-ZIP	SATELLITE BEACH FL			ITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 T	TLE		Change L Addition
NAME	BESSINGER, DONALD JOHN		2.2 N	AME		
STREET ADDRESS	405 WILSON AVE		2.3 \$	TREET ADDRESS	e .	
CITY-ST-ZIP	SATELLITE BEACH FL			CITY-ST-ZIP		
TITLE	D DESCRIPTION OF THE PROPERTY	DELETE	3,1 T			Change Addition
NAME	BESSINGER, BERENDA ROSI	Ė	3.2 N	I		
STREET ADDRESS	405 WILSON AVE		1	TREET ADDRESS		
CITY-ST-ZIP	SATELLITE BEACH FL	Discrete		OTY-SI-ZIP		
TITLE		☐ DELET E	4.1 7			☐ Change ☐ Addition
NAME			4, 2			
STREET ADDRESS	1			TREET ADDRESS		İ
CITY-ST-ZIP		DE LETE	4.4 CITY-\$T-ZIP			
TITLE	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5.1 T	IILE [
						Change Addition
NAME			5.2 N			L] Change L] Addition
STREET ADDRESS		<u></u>	5.3 \$	TREET ADDRESS		Change Addition
STREET ADDRESS CITY-ST-ZIP			5.3 S 5.4 C	TREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP VITLE		DELETE	5.3 S 5.4 C 6.1 T	TREET ADDRESS HTY - \$1 - ZIP TLE	ı	Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME			5.3 S 5.4 C 6.1 T 6.2 N	TREET ADDRESS HTY - ST - ZIP TLE AME		
STREET ADDRESS CITY-ST-ZIP TITLE			5.3 S 5.4 C 6.1 T 6.2 N 6.3 S	TREET ADDRESS HTY - \$1 - ZIP TLE		

14. Thereby 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.