

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J86323

Entity Name: WGUL FM, INC.

FILED  
May 04, 2009  
Secretary of State

## Current Principal Place of Business:

35048 U.S. HWY 19 NORTH  
PALM HARBOR, FL 34684

## Current Mailing Address:

35048 U.S. HWY 19 N  
PALM HARBOR, FL 34684

## New Principal Place of Business:

13825 US HWY 19  
SUITE 400  
HUDSON, FL 34667

## New Mailing Address:

13825 US HWY 19  
SUITE 400  
HUDSON, FL 34667

FEI Number: 59-2857839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHURDELL, STEPHEN  
35048 U.S. HWY 19 NORTH  
PALM HARBOR, FL 34684 US

## Name and Address of New Registered Agent:

SCHURDELL, STEPHEN  
13825 US HWY 19  
SUITE 400  
HUDSON, FL 34667 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

05/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MARCOCCI, BETTY  
Address: 35048 U.S. HWY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684

Title: P ( ) Delete  
Name: SCHURDELL, STEPHEN J  
Address: 35048 U.S. HWY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MARCOCCI, BETTY  
Address: 13825 US HWY 19  
City-St-Zip: HUDSON, FL 34667

Title: P (X) Change ( ) Addition  
Name: SCHURDELL, STEPHEN J  
Address: 13825 US HWY 19  
City-St-Zip: HUDSON, FL 34667

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN J SCHURDELL

P

05/04/2009

Electronic Signature of Signing Officer or Director

Date