

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K77105** (0)

1. Corporation Name

STYLES BROADCASTING COMPANY, INC.



Principal Place of Business

**2316 WEST 23 ST
SUITE A
PANAMA CITY FL 32405
US**

Mailing Address

**13315 NORTH TAMiami TRAIL
NAPLES FL 33963
US**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

29

30

3. Date Incorporated or Qualified

04/03/1989

3a. Date of Last Report

04/17/1995

4. FEI Number

59-2959846

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GERMAIN, ROBERT L., JR.
13315 NORTH TAMiami TR
NAPLES FL 33963**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CED
STYLES, KIM
3055 ROUND TABLE CT
NAPLES FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PSD
DI BACCO, THOMAS
3055 ROUND TABLE CT.
NAPLES FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VTD
GERMAIN, ROBERT L. JR.
2107 21ST COURT
NAPLES FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GERMAIN, RICHARD B.
4740 RIVERSIDE DR
COLUMBUS OH** ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GERMAIN, STEPHEN L.
166 STANBERRY AVE.
BEXLEY OH** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addit on

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS A. DI BACCO 4-10-96 (904) 769-2249

Date

Daytime Phone

CR2E034 (12/95)