

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90009 012 ****61.25

DOCUMENT # N15791

1. Corporation Name

WBVM-90.5-FM, INC.

Principal Place of Business

2816 MORRISON AVENUE
TAMPA FL 33609
US

Mailing Address

6363-9TH AVE..N.
ST. PETERSBURG FL 33710



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

3. Date Incorporated or Qualified

07/09/1986

4. FEI Number

59-2690242

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

9. Name and Address of Current Registered Agent

WARD, PAUL A.,JR.
6363-9TH AVE.,N.
ST. PETERSBURG FL 33743

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD
NAME MULDON, BRENDAN
STREET ADDRESS 6363-9TH AVE. NO.
CITY-ST-ZIP ST. PETERSBURG FL ☐ DELETE

TITLE ST
NAME WARD,PAUL A.,JR.
STREET ADDRESS 6363-9TH AVE..N.
CITY-ST-ZIP ST.PETERSBURG FL ☐ DELETE

TITLE VD
NAME GIBBONS, ROBERT C.
STREET ADDRESS 6363 9TH AVE NORTH
CITY-ST-ZIP ST. PETERSBURG FL ☐ DELETE

TITLE C
NAME LYNCH, ROBERT N.
STREET ADDRESS 6363-96H AVE N
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME DEPTULA, ELIZABETH M.
5.3 STREET ADDRESS 6363 9th AVE N
5.4 CITY-ST-ZIP ST PETERSBURG FL 33710

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, 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 like empowered.

SIGNATURE: Rev. Brendan Muldon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99

Date

Daytime Phone #

CR2E037 (1/98)