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Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **P20962** (7)
1. Corporation Name
BEASLEY BROADCASTING MANAGEMENT CORPORATION



Principal Place of Business Mailing Address
3033 RIVIERA DRIVE **3033 RIVIERA DRIVE**
SUITE 200 **SUITE 200**
NAPLES FL 34103 **NAPLES FL 34103-2748**

3. Date Incorporated or Qualified **09/20/1988** 3a. Date of Last Report **04/11/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		56-1294782		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		28		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		Zip		Country	
24		25		29		30	

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEASLEY, GEORGE G.	1.2 NAME	Beasley, George G.
STREET ADDRESS	3033 RIVIERA DR #200	1.3 STREET ADDRESS	3033 Riviera Drive #200
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	Naples, FL 34103
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEASLEY, SHIRLEY ANN	2.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. #200	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BEASLEY, ROBERT E.	3.2 NAME	Beasley Caroline
STREET ADDRESS	7336 GARY DRIVE	3.3 STREET ADDRESS	3033 Riviera Drive #200
CITY-ST-ZIP	MIAMI BEACH FL	3.4 CITY-ST-ZIP	Naples, FL 34103
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Beasley, Brian
STREET ADDRESS		4.3 STREET ADDRESS	3033 Riviera Drive #200
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Naples, FL 34103
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Beasley, Bruce G.
STREET ADDRESS		5.3 STREET ADDRESS	3033 Riviera Drive #200
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Naples, FL 34103
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Caroline Beasley **Caroline Beasley, Sec** 4/16/97 (941) 263-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)