

FRN

0006548234

# Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

**Entity Name** 

File Number: 0000042304Submit Date: 2018-02-15FRN: 0006548234Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 02/15/2018Filing Status: ActiveStatusStatusStatus

# **Section I - General Information**

#### 1. Respondent

The Board of Regents of Florida, Acting for and on behalf of

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
c/o Rubin, Winston, Diercks, Harris & Cooke, LLP Suite 200	Washington	DC	20036	+1 (202) 861- 0870	jwinston@rwdhc. com

#### 2. Contact Representative

Name	Organization	
James L. Winston	Rubin, Winston, Diercks, Harris & Cooke, LLP	

			Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
1201 Connecticut Ave., NW Suite 200	Washington	DC	20036	+1 (202) 861-0870	jwinston@rwdhc.com

3. Application	١
Filing Fee	

4. Control of Respondent

Relationship to stations/permits	Licensee	
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No

(b) Provide the following information about this report:

(a) Provide the following information about the Respondent:

Purpose

Not Applicable

Biennial

"As of" date

#### 10/01/2017

When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.

# 5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Nar	Ff	RN		
The Board of Regents of Florida, Acting for and on behalf of 0006548234				
Fac. ID No.	Call Sign	City	State	Service
21755	WANM	TALLAHASSEE	FL	FM

# Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents	icensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all ontracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this eport. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee espondents should select "Not Applicable" in response to this question.				
	Not Applicable.				
2. Ownership Interests	generating a series of subforms. itself. If the Respondent is not a governing entity), stockholders, a to the standards set forth in 47 C	Answer each question on each natural person, also list each of and any other persons or entities C.F.R. Section 73.3555. (A "direc	enter detailed information about ownership interests by subform. The first subform listing should be for the Respondent the officers, members of the governing board (or other s with a direct attributable interest in the Respondent pursuant et" interest is one that is not held through any intervening ibutable interest in the Respondent separately.		
			nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.		
	In the case of vertical or indirect attributable interest in the Licens		nose interests in the Respondent that also represent an ng submitted.		
	separate ownership reports. In s	ities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file arate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have attributable interest in the Licensee(s) for which the report is being submitted.			
	Please see the Instructions for fu	urther detail concerning interests	that must be reported in response to this question.		
		he Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. lease see the Instructions for detailed information and guidance concerning this requirement.			
	Ownership Information	n			
	FRN	0006548234			
	Entity Name	The Board of Regents of Florid	la, Acting for and on behalf of		
	Address	PO Box			
		Street 1	c/o Rubin, Winston, Diercks, Harris & Cooke, LLP		
		Street 2	Suite 200		
		City	Washington		

	State ("NA" if non-U.S. address)	DC		
	Zip/Postal Code	20036		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
<b>Positional Interests</b> (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

FRN	9990121731			
Name	Matthew Carter			
Address	PO Box			
	Street 1	1904 Miccosukee Road		
	Street 2	Unit #6		
	City	Tallahassee		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	32308		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Attorney			
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
nterest Percentages	Voting	8.3%		

	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	No

#### **Ownership Information** FRN 9990122934 Name Thomas Dortch, Jr. Address **PO Box** Street 1 1273 Springhouse Lane SW Street 2 City Atlanta State ("NA" if non-U.S. GA address) **Zip/Postal Code** 30311 Country (if non-U.S. **United States** address) Other Interest Holder Listing Type Member of Governing Board (or other governing entity) **Positional Interests** (check all that apply) **Business person** Principal Profession or Occupation Florida Board of Governor By Whom Appointed or Elected Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Male **Information (Natural** Persons Only) Ethnicity Not Hispanic or Latino Race Black or African American **Interest Percentages** 8.3% Voting (enter percentage values 0.0% Equity from 0.0 to 100.0) **Total assets (Equity Debt** Plus) Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?

Ownership Information				
FRN	9990122935			
Name	Bettye Grable			
Address	PO Box			
	Street 1	322 Spruce Creek Drive		

	Street 2				
	City	Tallahassee			
	State ("NA" if non-U.S. address)	FL			
	Zip/Postal Code	32312			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Professor				
By Whom Appointed or Elected	Faculty Senate				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Female			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	Black or African American			
Interest Percentages	Voting	8.3%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)				
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

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Ownership	mormation

Ownership Information			
FRN	9990122936		
Name	Devin Harrison		
Address	PO Box		
	Street 1	3037 North Fulmer Circle	
	Street 2		
	City Tallahassee   State ("NA" if non-U.S. address) FL		
	Zip/Postal Code 32303		
	Country (if non-U.S. United States   address) Image: Country of the states		
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Student		
By Whom Appointed or Elected	Student Body		
Citizenship, Gender, Citizenship US		US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values from 0.0 to 100.0)VotingEquity	Voting	8.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations			

Ownership Information			
FRN	9990122937		
Name	David Lawrence, Jr.		
Address	PO Box		
	Street 1	2800 Toledo Street	
	Street 2	#2	
	City	Coral Gables	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33134	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired publisher		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	No

FRN	9990122938		
Name	Kelvin Lawson		
Address	PO Box		
	Street 1	384 North Lombardy Loop	
	Street 2		
	City	Jacksonville	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32259	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Business person		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information		
FRN	9990122939	
Name	Harold F. Mills	
Address	PO Box	
	Street 1	11900 Lake Butler Blvd.
	Street 2	

	City	Windermere	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34786	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Business person		
By Whom Appointed or Elected	Florida Board of Governors		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No

Ownership Information			
FRN	9990122940		
Name	Kimberly A. Moore		
Address	PO Box		
	Street 1	444 Appleyard Drive	
	Street 2		
	City Tallahassee		
	State ("NA" if non-U.S. address)FLZip/Postal Code32304Country (if non-U.S. address)United States		
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	College Administrator		

By Whom Appointed or Elected	Florida Board of Governors	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations No		

Ownership Information			
FRN	9990122941		
Name	Belvin Perry, Jr.		
Address	PO Box	905	
	Street 1		
	Street 2		
	City	Orlando	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32802	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information			
FRN	9990122942		
Name	Craig Reed		
Address	PO Box		
	Street 1	3904 White Stone Road	
	Street 2		
	City	Newtown Square	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	19073	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Business person		
By Whom Appointed or Elected	Florida Board of Governors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting	8.3%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

#### **Ownership Information**

FRN	9990122943	
Name	T. Nicole Washington	
Address	PO Box	
	Street 1	1250 West Avenue
	Street 2	Apt. 7W
	City	Miami Beach

	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32601	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Higher Education Expert		
By Whom Appointed or Elected	Florida Board of Governors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information	Ownershi	p Inforr	nation
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FRN	9990122944	
Name	Robert L. Woody	
Address	PO Box	
	Street 1	200 East University Avenue
	Street 2	
	City	Gainesville
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	32601
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Government employee	
By Whom Appointed or Elected	Governor	

	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
		r more breadcast stations	No
Does interest holder have that do not appear on this			
that do not appear on this (b) Respondent certifies t	s report? hat any interests, including equi this filing are non-attributable.		Yes
that do not appear on this (b) Respondent certifies to interests, not reported in If "No," submit as an exhibi	s report? hat any interests, including equi this filing are non-attributable.	ty, financial, or voting	
that do not appear on this (b) Respondent certifies to interests, not reported in If "No," submit as an exhibi	hat any interests, including equitations filing are non-attributable. t an explanation.	ty, financial, or voting	Yes

### 3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

The licensee has no parent entity.

## **Section III - Certification**

#### Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: Interim Provost Exact Legal Title or Name of Respondent: Board of Trustees of Florida A&M University Name: Rodner Wright Phone: 8505993276 02/15/2018