

FRN

0027669027

Not Applicable

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

Entity Name

File Number: 0000060075Submit Date: 2018-10-01FRN: 0027669027Purpose: Commercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:10/01/2018Filing Status: ActiveStatus: Active

Section I - General Information

1. Respondent

DOOR OF HOPE CHRISTIAN CHURCH, INC.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
401 MARTIN LUTHER KING JR. BLVD,	Marion	SC	29751	+1 (843) 423- 0340	mblue1918@aol. com

2. Contact Representative

N	lame	Organization
	DAVID F. TILLOTSON	Law Office of David Tillotson

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4606 Charleston Ter NW	Washington	DC	20007-1911	+1 (202) 625-6241	dtlaw67@gmail.com

3. Application Filing Fee

4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Not-for-profit corporation	

(b) Provide the following information about this	report:
(b) i forfac the following mornation about this	report.

Purpose	Transfer of control or assignment of license/permit
"As of" date	08/01/2018
	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) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name FRN				
DOOR OF HOPE CHRISTIAN CHURCH, INC. 0027669027				
Fac. ID No.	Call Sign	City	State	Service

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Restated Artilces of Incorporation	
Parties to contract or instrument	Respondent and state of South Carolina	
Date of execution	01/2016	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation	

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information			
0027669027			
DOOR OF HOPE CHRISTIAN CHURCH, INC.			
PO Box			
Street 1	401 MARTIN LUTHER KING JR. BLVD,		
Street 2			
	DOOR OF HOPE CHRISTIAN PO Box Street 1		

	City	Marion			
	State ("NA" if non-U.S. address)	SC			
	Zip/Postal Code	29751			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		more broadcast stations	No		

Ownership Information				
FRN	9990135002			
Name	Michael Blue			
Address	PO Box			
	Street 1	3424 MAUDE'S ROAD		
	Street 2			
	City	MARION		
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	22209		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values	Voting	14.3%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have	an attributable interest in one c	or more broadcast stations	No	

that do not appear on this report?

Ownership Information				
FRN	9990135003			
Name	Malinda J. BLUE			
Address	PO Box			
	Street 1	424 MAUDE'S ROAD		

	Street 2		
	City	MARION	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	22209	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	14.3%	Jointly Held? No
from 0.0 to 100.0)	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

Ownership Information			
FRN	9990135004		
Name	Raymond Timmons	Raymond Timmons	
Address	PO Box		
	Street 1 4820 TIMMONSVILLE LOOP		
	Street 2		
	City	Mullins	
	State ("NA" if non-U.S. address)	J. S . SC	
	Zip/Postal Code 29574		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values from 0.0 to 100.0)Voting14.3%Jointly He NoTotal assets (Equity Debt Plus)0.0%		Jointly Held? No	
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	9990135005		
Name	Briscoe Davis		
Address	РО Вох		

	Street 1	1608 VICTORY COURT	
	Street 2		
	City	Marion	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	22209	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	14.3%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No			No

that do not appear on this report?

Ownership Information				
FRN	9990135006			
Name	Earnest Davis, Jr.			
Address	PO Box			
	Street 1	705 FOXBORO ROAD		
	Street 2			
	City	Marion	Marion	
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	22209		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director			
Interest Percentages (enter percentage values	Voting	14.3%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information		
FRN	9990135007	
Name	Cassandra MCCELLAN	

Address	PO Box		
	Street 1	2808 MAIN STREET	
	Street 2		
	City	Sellers	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29592	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	14.3%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No

Ownership Information

FRN	9990135008		
Name	GEORGE MCELVEEN		
Address	PO Box		
	Street 1	1406 GREGG AVENUE	
	Street 2		
	City	Florence	
	State ("NA" if non-U.S. SC address) SC		
	Zip/Postal Code	29501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
(enter percentage values No		Jointly Held? No	
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?			No

hold an attributable interest in any newspaper entities in the same market as any station for which this report is	
filed, as defined in 47 C.F.R. Section 73.3555?	
f "Yes," provide information describing the interest(s), using	
EITHER the subform OR the spreadsheet option below.	
Respondents with a large number (50 or more) of entries to	
submit should use the spreadsheet option.	
NOTE: Spreadsheets must be submitted in a special XML	
Spreadsheet format with the appropriate structure that is	
specified in the documentation. For instructions on how to	
use the spreadsheet option to complete this question	
(including templates to start with), please Click Here.	
If using the subform, leave the percentage of total assets	
Equity Debt Plus) field blank for an interest holder unless	
that interest holder has an attributable interest in the	
newspaper entity solely on the basis of the Commission's	
Equity Debt Plus attribution standard, 47 C.F.R. Section	
73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
nto the percentage of total assets (Equity Debt Plus) field	
or an interest holder unless that interest holder has an	
attributable interest in the newspaper entity solely on the	
pasis of the Commission's Equity Debt Plus attribution	
standard.	
The Respondent must provide an FCC Registration Number	
for each interest holder reported in response to this	
question. Please see the Instructions for detailed information	
and guidance concerning this requirement.	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

Family Relationships

FRN	9990135002	Name	Michael Blue
FRN	9990135003	Name	Malinda J BLUE
Relationship	Spouses		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If " <u>Yes</u> ," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

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: President Exact Legal Title or Name of Respondent: Door of Hope Christian Church Name: Michael Blue Phone: 8452671918 10/01/2018