

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

Entity Name

File Number: 0000229677Submit Date: 2023-11-30FRN: 0001735646Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 11/30/2023Filing Status: ActiveStatusStatusStatus

Section I - General Information

1. Respondent

The Florida Gulf Coast University Board of Trustees

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
10501 FGCU Boulevard South	Fort Myers	FL	33965- 6565	+1 (239) 590- 7072	clewis@wgcu. edu

2. Contact Representative

Name	Organization
Derek Teslik	Gray Miller Persh LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2233 Wisconsin Ave., NW, Ste. 226	Washington	DC	20007	+1 (202) 559- 7489	dteslik@graymillerpersh. com

3. Application Filing Fee

Not Applicable

FRN

0001735646

Filing Fee

4.	Contro	ol of
Re	espond	ent

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

(b) Provide the following information about this report.	
Purpose	Biennial
"As of" date	10/01/2023
	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 Name	FRN
The Florida Gulf Coast University Board of Trustees	0001735646

Fac. ID No.	Call Sign	City	State	Service
62388	WGCU	FORT MYERS	FL	DTV
69042	WGCU-FM	FORT MYERS	FL	FM
69378	WMKO	MARCO ISLAND	FL	FM

Section II – Biennial Ownership Information

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

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Membership Certification	
Parties to contract or instrument	Public Broadcasting Service	
Date of execution	07/2023	
Date of expiration	06/2024	
Agreement type (check all that apply)	Network Affiliation Agreement	

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, members of the governing board (or other governing entity), stockholders, 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) 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) 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		
FRN	0001735646	
Entity Name The Florida Gulf Coast University Board of Trustees		

IA" if non-U.S. al Code (if non-U.S.	10501 FGCU Boulevard Sout Fort Myers FL 33965-6565 United States	h
al Code (if non-U.S.	FL 33965-6565	
al Code (if non-U.S.	FL 33965-6565	
al Code (if non-U.S.	33965-6565	
(if non-U.S.		
	United States	
Respondent		
Respondent		
Interest holder is not a Tribal nation or Tribal entity		
	0.0%	
	0.0%	
sets (Equity Debt	0.0%	
e	ent older is not a Tribal sets (Equity Debt	ent older is not a Tribal nation or Tribal entity 0.0% 0.0%

Ownership Information			
FRN	9990122770		
Name	Joseph G. Fogg, III.		
Address PO Box			
	Street 1	311 8th Avenue South	
	Street 2		
	City	Naples	
	State ("NA" if non-U.S. FL address)		
	Zip/Postal Code 34102		
	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	Retired		
By Whom Appointed or Elected	Board of Governors University System of Florida		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	

Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	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	9990122774		
Name	J. Leo Montgomery		
Address	PO Box		
	Street 1	15635 Villoresi Way	
	Street 2		
	City	Naples	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34110	
	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	Retired		
By Whom Appointed or Elected	Board of Governors University System of Florida		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(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 o report?	r more broadcast stations	No

Ownership Information

FRN	9990138528		
Name	Richard Eide, Jr.		
Address	PO Box		
	Street 1	340 Little Harbour Lane	
	Street 2		
	City	Naples	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34102	
	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	Retired		
By Whom Appointed or Elected	Board of Governors, University System of Florida		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information

FRN	9990122771		
Name	Robert Blakeslee Gable		
Address	PO Box		
	Street 1	2600 Golden Gate Parkway, Ste. 201	
	Street 2		
	City	Naples	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34105	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	CEO, Barron Collier Companies		
By Whom Appointed or Elected	Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages Voting 8.3%		8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have	an attributable interest in one o	or more broadcast stations No	

that do not appear on this report?

Ownership Information			
FRN	9990122777		
Name	Robbie Roepstorff	Robbie Roepstorff	
Address	PO Box		
	Street 1	13000 S. Cleveland Avenue	
	Street 2		
	City	Fort Myers	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33907	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Banker	Banker	
By Whom Appointed or Elected	Board of Governors, Universit	Board of Governors, University System of Florida	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	

White

Race

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have	an attributable interest in one o	r more broadcast stations

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

No

Ownership Information			
FRN	9990147403		
Name	Jaye Semrod		
Address	PO Box		
	Street 1	333 Cove Lane	
	Street 2		
	City	Naples	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34102	
	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	Retired		
By Whom Appointed or Elected	Board of Governors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

that do not appear on this report?

Ownership Information

FRN	9990147404	
Name	Edward Morton	
Address	PO Box	

	Street 1	116 Palmetto Dunes Circle	
	Street 2		
	City	Naples	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34133	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	·	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Financial Services		
By Whom Appointed or Elected	Board of Governors		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information

that do not appear on this report?

•			
FRN	9990154287		
Name	Emory Cavin		
Address	PO Box		
	Street 1	1430 Terra Palma Drive	
	Street 2 City Fort Myers		
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33901	
	Country (if non-U.S. United States 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	Board Member		
By Whom Appointed or Elected	Student Body President		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
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	Does interest holder have an attributable interest in one or more broadcast stations No		

that do not appear on this report?

Ownership Information			
FRN	9990154288		
Name	Lyndsay Rhodes		
Address	PO Box		
	Street 1	9896 Springlake Circle	
	Street 2		
	City	Estero	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33928	
	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	Professor		
By Whom Appointed or Elected	FGCU Faculty Senate		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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 that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information			
FRN	9990154289		
Name	Luis E. Rivera, II.	Luis E. Rivera, II.	
Address	PO Box		
	Street 1	13080 Gray Heron Dr.	
	Street 2		
	City	North Fort Myers	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33903	
	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	13080 Gray Heron Drive		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
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 a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information			
FRN	9990154290		
Name	Peter Sulick		
Address	PO Box		
	Street 1	1801 Gulfshore Blvd. N., Unit 803	
	Street 2		

g entity)		
Chairman CEO Dynasil Corp of America		
Governor		
US		
Male		
Not Hispanic or Latino		
0.0%		
st stat	ions	ions No

Ownership Information		
FRN	9990154291	
Name	Michael Wynn	
Address	PO Box	
	Street 1	7535 Treeline Drive
	Street 2	
	City	Naples
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	34119
	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	President, Sunshine Ace Hardware	

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	White	
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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No
(b) Respondent certifies th	at any interests, including equi	ty, financial, or voting	Yes

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	

(c) 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.	

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.

There is no parent entity.

Section III - 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).	
	Authorized Party to Sign	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,

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, Florida Gulf Coast University Exact Legal Title or Name of Respondent: The Florida Gulf Coast University Board of Trustees Name: Aysegul Timur Phone: 2395901055
		11/30/2023