

(REFERENCE COPY - Not for submission)

FRN

0005936877

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

Entity Name

File Number:0000040746Submit Date:2018-01-25FRN:0005935499Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/25/2018Filing Status:Active

Section I - General Information

1. Respondent

CHRISTIAN TELEVISION OF PENSACOLA/MOBILE, INC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
6922 142ND AVE. N.	Largo	FL	33771	+1 (727) 535- 5622	soneal@ctntv. net

2. Contact Representative

Name	Organization
Joseph C. Chautin III	HARDY, CAREY, CHAUTIN & BALKIN, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629- 0777	jchautin@hardycarey. com

3. Application Filing Fee

Question Response Is this application being submitted without a filing fee? No

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAT	1	95	\$70.00
		·	·	1	Total	\$70.00

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:

Purpose	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 Name	FRN
CHRISTIAN TELEVISION OF PENSACOLA/MOBILE, INC	0005936877

Fac. ID No.	Call Sign	City	State	Service
10894	WHBR	PENSACOLA	FL	DTV

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. 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 Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Document Information			
Description of contract or instrument	ARTICLES OF INCORPORATION		
Parties to contract or instrument	STATE OF FLORIDA		
Date of execution	08/1984		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Entity Formation		

Document Information

Description of contract or instrument	BY LAWS
Parties to contract or instrument	BOARD OF DIRECTORS
Date of execution	08/1984
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Organization

Document Information

Description of contract or instrument	AMENDMENT TO ARTICLES OF INCORPORATION
Parties to contract or instrument	STATE OF FLORIDA
Date of execution	12/1998
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Formation

Document Information

Document Information		
Description of contract or instrument	AMENDMENT TO BY LAWS	
Parties to contract or instrument	BOARD OF DIRECTORS	
Date of execution	12/1998	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Entity Organization	

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) 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	0005936877	
Entity Name	CHRISTIAN TELEVISION OF PENSACOLA/MOBILE, INC	
Address	PO Box	

	Street 1	6922 142ND AVE. N.	
	Street 2		
	City	Largo	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33771	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
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

Ownership mornation	Ownership information		
FRN	0019245737		
Name	Robert S. Young		
Address	PO Box		
	Street 1	4882 WILDE POINT DRIVE	
	Street 2		
	City	SARASOTA	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34223	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

0019245695 Wayne Wetzel PO Box		
PO Box		
Street 1	6922 142ND AVE N.	
Street 2		
City	Largo	
State ("NA" if non-U.S. address)	FL	
Zip/Postal Code	33771	
Country (if non-U.S. address)	United States	
Other Interest Holder		
Officer, Director		
Citizenship	US	
Gender	Male	
Ethnicity	Not Hispanic or Latino	
Race	White	
Voting	16.6%	Jointly Held? No
Equity	0.0%	
Total assets (Equity Debt Plus)	0.0%	
	address)Zip/Postal CodeCountry (if non-U.S. address)Other Interest HolderOfficer, DirectorOfficer, DirectorCitizenshipGenderEthnicityRaceVotingEquityTotal assets (Equity Debt Plus)n attributable interest in one or	address)Zip/Postal Code33771Country (if non-U.S. address)United StatesOther Interest HolderUnited StatesOfficer, DirectorVficer, DirectorCitizenshipUSGenderMaleEthnicityNot Hispanic or LatinoRaceWhiteVoting16.6%Equity0.0%Total assets (Equity Debt0.0%

Ownership Information		
FRN	0019245729	
Name	Virginia Oliver	
Address	PO Box	
	Street 1	6150 101ST AVE
	Street 2	

	City	PINNELLAS PARK	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33782	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	16.6%	Jointly Held? No
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	Yes

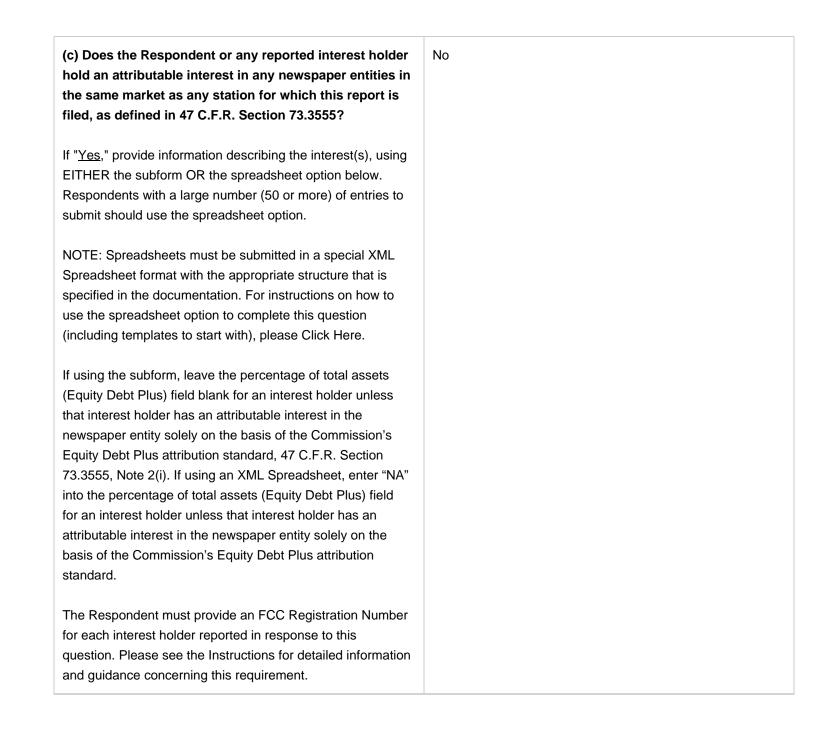
Ownership Information		
FRN	0019245752	
Name	Robert D'Andrea, Jr.	
Address	PO Box	
	Street 1	6922 142ND AVE N.
	Street 2	
	City	Largo
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33771
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	Jointly Held? No
	Equity	0.0%	
	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?			Yes

Ownership Information	0019161231			
Name	Robert D'Andrea			
Address	PO Box			
	Street 1	6922 142ND AVE N.		
	Street 2			
	City	Largo		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33771		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	16.6%	Jointly Held? No	
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	Yes	

Ownership Information			
FRN	0019245711		
Name	Jimmy Smith		
Address	PO Box		
	Street 1	PO BOX 2430	
	Street 2		

	City	CLEVELAND	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37320-2430	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	16.6%	Jointly Held? No
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	Yes
	at any interests, including equi nis filing are non-attributable. an explanation.	ty, financial, or voting	Yes



(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.

ranniy Relationships			
FRN	0019161231	Name	Robert D'Andrea
FRN	0019245752	Name	Robert DAndrea , Jr .
Relationship	Parent/Child		

No

Family Relationships

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

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.

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.

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: President Exact Legal Title or Name of Respondent: CHRISTIAN TELEVISION OF PENSACOLA /MOBILE, INC. Name: Robert D'Andrea Phone: 7275355622 01/25/2018