

(REFERENCE COPY - Not for submission)

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

 File Number:
 0000048444
 Submit Date:
 2018-03-08
 FRN:
 0001843341

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:03/08/2018Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0001843341	Radio Training Network Inc

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 7217	Lakeland	FL	33807- 7217	+1 (863) 644- 3464	Gosrad@AOL. com

2. Contact Representative

itative

Name

A. Wray Fitch, III.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
8280	McLean	VA	22102	+1 (703) 761-5013	awf@gg-law.com
Greensboro					
Drive					
Suite 140					

Organization

Gammon & Grange, P.C.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Licensee		
Is the Respondent's governing bo indirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No	

(b) Provide the following information about this report:	
Purpose	Transfer of control or assignment of license/permit
"As of" date	03/06/2018
	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.

/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	F	RN			
Radio Training Network Inc			0001843341		
Fac. ID No.	Call Sign	City	State	Service	
174989	WBIJ	SALUDA	SC	FM	

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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. If the agreement is 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	ARTICLES OF INCORPORATION	
Parties to contract or instrument	RADIO TRAINING NETWORK, INC.; STATE OF GEORGIA	
Date of execution	10/1984	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: ARTICLES OF INCORPORATION	

Document Information		
Description of contract or instrument	ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION	
Parties to contract or instrument	RADIO TRAINING NETWORK, INC.; STATE OF GEORGIA	
Date of execution	02/1991	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION	

Document Information

Description of contract or instrument	BYLAWS
Parties to contract or instrument	RADIO TRAINING NETWORK, INC.
Date of execution	10/1984
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: BYLAWS

(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) 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				
FRN	0001843341			
Entity Name	Radio Training Network Inc			
Address	PO Box	7217		
	Street 1			
	Street 2			
	City	Lakeland		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33807-7217		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Interest Percentages	Voting	0.0%		
(enter percentage values 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 Yes that do not appear on this report?				

Ownership Information

FRN	0020022653		
Name	James L. Campbell		
Address	PO Box		
	Street 1	2860 Medinah Circle	
	Street 2		
	City	Lakeland	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33803	

	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	President, Radio Training Network, Inc.		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	20.0%	
(enter percentage values 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 or report?	or more broadcast stations	Yes

Ownership Information			
FRN	9990053911		
Name	Ruth J. Campbell		
Address	PO Box		
	Street 1	2860 Medinah Circle	
	Street 2		
	City	Lakeland	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33803	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Assistant Secretary		
Principal Profession or Occupation	Executive Secretary		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes

 Ownership Information

 FRN
 9990053887

 Name
 Lee Freeman

Address	PO Box		
	Street 1	1958 Monroe Drive, NE	
	Street 2		
	City	Atlanta	
	State ("NA" if non-U.S. address)	GA	
	Zip/Postal Code	30324	
	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	Vice President of Property Management Company		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	

Ownership Information		
FRN	9990053903	
Name	Larry Maxwell	
Address	PO Box	832
	Street 1	
	Street 2	
	City	Lake Wales
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33849
	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 Owner-Developer	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages	Voting	20.0%
(enter percentage values		

Ownership Information

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?		Yes	

Ownership Information			
FRN	9990053895		
Name	Dan McBride		
Address	PO Box		
	Street 1	2459 Laurel Glen Drive	
	Street 2		
	City	Lakeland	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33803	
	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	Executive Pastor		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	20.0%	
(enter percentage values 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 Yes that do not appear on this report?			

Ownership Information		
FRN	0020022513	
Name	Michael L. Watkins	
Address	PO Box	
	Street 1	1447 Tangier Way
	Street 2	
	City Sarasota	
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	34239
	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	President of a Foundation		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	20.0%	
(enter percentage values 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?		Yes	
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, 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 "Yes," 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: Radio Training Network, Inc. Name: James L. Campbell Phone: 8636443464 03/08/2018