

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

 
 File Number:
 0000063348
 Submit Date:
 2018-11-06
 FRN:
 0021206529
 Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: **Received** Status Date: 11/06/2018 Filing Status: Active

## **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0021206529	Southern Belle, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non- U.S. address)	Zip Code	Phone	Email
115 W. MAIN STREET	Frankfort	КҮ	20878	+1 (130) 190-8416	AMOSKOWITZ@AMOSKOWITZLAW. COM

### 2. Contact Representative

Name		Organization	
	ALLAN G. MOSKOWITZ Esq.	Allan G. Moskowitz, Esq.	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
10845 TUCKAHOE WAY	NORTH POTOMAC	MD	20878	+1 (301) 908- 4165	AMOSKOWITZ@AMOSKOWITZLAW. COM

### 3. Application **Filing Fee**

Not Applicable

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Limited liability company	

#### (b) Provide the following information about this report:

Purpose	Transfer of control or assignment of license/permit	
"As of" date	11/06/2018 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	FRN		
Southern Belle, LLC		0021206529		
Fac. ID No.	Call Sign	City	State	Service
62369	WJUN	MEXICO	PA	AM

### 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	CERTIFICATE OF FORMATION			
Parties to contract or instrument	Southern Belle, LLC			
Date of execution	09/2011			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation			

Document Information				
Description of contract or instrument	KRISTIN CANTRELL FAMILY TRUST			
Parties to contract or instrument	Judith M, Confer, Trustee			
Date of execution	09/2011			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Trust			

#### 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					
FRN	0021206529				
Entity Name	Southern Belle, LLC	Southern Belle, LLC			
Address	PO Box				
	Street 1	115 W. MAIN STREET			
	Street 2				
	City	Frankfort	Frankfort		
	State ("NA" if non-U.S. address)	КҮ			
	Zip/Postal Code	20878			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
<b>Positional Interests</b> (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 Yes that do not appear on this report?					

Ownership Information					
FRN	0021206545				
Entity Name	Kristin Cantrell Family Trust				
Address	PO Box				
	Street 1	C/O 115 WEST MAIN STREET			
	Street 2				
	City	Frankfort			
	State ("NA" if non-U.S. address)	КҮ			
	Zip/Postal Code	40601			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder	·			
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member				
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No		
from 0.0 to 100.0)	Total assets (Equity Debt	100.0%			

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

Yes

FRN	0021428362			
Name	Kristin Cantrell			
Address	PO Box			
	Street 1	115 WEST MAIN STREET		
	Street 2			
	City	Frankfort		
	State ("NA" if non-U.S. address)	KY		
	Zip/Postal Code	40601		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one or report?	more broadcast stations	Yes	
	at any interests, including equit his filing are non-attributable. an explanation.	y, financial, or voting	Yes	
(c) Does the Respondent c	r any reported interest holder	No		
hold an attributable interes	st in any newspaper entities in ation for which this report is			
EITHER the subform OR the	mber (50 or more) of entries to			
·····				
NOTE: Spreadsheets must b Spreadsheet format with the	on. For instructions on how to complete this question			

(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"	
into the percentage of total assets (Equity Debt Plus) field	
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.	
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 No or related to each other as parentchild or as siblings?

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

(e) 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.	

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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Southern Belle, LLC</b> Name: <b>Kristin Cantrell</b> Phone: <b>5088751130</b> 11/06/2018

### Certification