



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000176020** | Submit Date: **2021-12-01** | FRN: **0019030956**

Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **12/01/2021**

Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0019030956	Northwood Ventures LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
11450 SE Dixie Highway Unit 101	Hode Sound	FL	33455	+1 (516) 364-5544	phomer@northwoodventures.com

2. Contact Representative

Name	Organization
Francisco R. Montero, Esq.	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 North 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0480	montero@fhhlaw.com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees
Nature of Respondent	Limited liability company

(b) Provide the following information about this report:	
Purpose	Biennial
"As of" date	10/01/2021 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
JVC Media of Florida, LLC	0030669287

Fac. ID No.	Call Sign	City	State	Service
3056	WXUS	DUNNELLON	FL	FM
3058	WMFQ	OCALA	FL	FM
19473	WWAV	SANTA ROSA BEACH	FL	FM
19475	WECQ	DESTIN	FL	FM
21810	WDYZ	ALTAMONTE SPRINGS	FL	AM
25403	WOTW	WINDERMERE	FL	FM
56374	WHWY	HOLT	FL	FM
59076	WYGC	HIGH SPRINGS	FL	FM
60811	WZLB	VALPARAISO	FL	FM

Licensee/Permittee Name	FRN
Community Broadcasters, LLC	0015336209

Fac. ID No.	Call Sign	City	State	Service
6484	WQKI-FM	ORANGEBURG	SC	FM
6485	WGFG	BRANCHVILLE	SC	FM
11624	WATN	WATERTOWN	NY	AM
11625	WTOJ	CARTHAGE	NY	FM
15835	DWDKD	KINGSTREE	SC	AM
15836	WWKT-FM	KINGSTREE	SC	FM
24149	WHYM	LAKE CITY	SC	AM
29140	WWBD	SUMTER	SC	FM
30799	WEFX	HENDERSON	NY	FM
43748	WBDR	COPENHAGEN	NY	FM
43833	WWHM	SUMTER	SC	AM
54503	WSPX	BOWMAN	SC	FM
55267	WDXY	SUMTER	SC	AM
55268	WIBZ	WEDGEFIELD	SC	FM
55269	WSIM	LAMAR	SC	FM
63707	WLJI	SUMMERTON	SC	FM
66643	WPDT	COWARD	SC	FM
66658	WLFK	GOUVERNEUR	NY	FM

66661	WQTK	OGDENSBURG	NY	FM
66663	WSLB	OGDENSBURG	NY	AM
73400	WOLH	FLORENCE	SC	AM
160804	WTQS	CAMERON	SC	AM
166014	WOTT	CALCIUM	NY	FM
183329	WFRK	QUINBY	SC	FM

Licensee/Permittee Name	FRN
JVC Media, LLC	0019034305

Fac. ID No.	Call Sign	City	State	Service
18239	WRCN-FM	RIVERHEAD	NY	FM
31754	WPTY	CALVERTON-ROANOKE	NY	FM
54519	WJVC	CENTER MORICHES	NY	FM
57672	WBON	WESTHAMPTON	NY	FM

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.

Not Applicable.

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	0019030956
Entity Name	Northwood Ventures LLC

Address	PO Box		
	Street 1	11450 SE Dixie Highway	
	Street 2	Unit 101	
	City	Hode Sound	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33455	
	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 from 0.0 to 100.0)	Voting	0.0%	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?			No

Ownership Information			
FRN	0014399091		
Name	Peter G. Schiff		
Address	PO Box		
	Street 1	11450 SE Dixie Highway	
	Street 2	Unit 101	
	City	Hobe Sound	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33455	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other - Manager		
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 from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Equity	47.0%	
	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?			No

Ownership Information

FRN	0019797786		
Name	Paul R. Homer		
Address	PO Box		
	Street 1	2301 Lucien Way	
	Street 2	Suite 180	
	City	Maitland	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32751	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, LC/LLC/PLLC Member		
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 from 0.0 to 100.0)	Voting	0.0%	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?			No

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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<p>(c) Does the Respondent or any reported interest holder 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?</p> <p>If "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.</p> <p>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.</p> <p>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" 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.</p> <p>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.</p>	<p>No</p>
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<p>(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?</p> <p>If "Yes," provide the following information for each such the relationship.</p>	<p>No</p>
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<p>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</p> <p>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.</p>	<p>No</p>
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Certification

Section	Question	Response
<p>Authorized Party to Sign</p>	<p>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 LICENSE --OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).</p>	

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: **Officer**
Exact Legal Title or Name of Respondent:
Northwood Ventures LLC
Name: **Paul Homer**
Phone: **5163645544**

12/01/2021