

(REFERENCE COPY - Not for submission)

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

File Number: **0000175837** Submit Date: **2021-12-01** FRN: **0001811231** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/01/2021

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0001811231	Florida Public Radio Inc

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 505 505 Josephine St	Titusville	FL	32796	+1 (321) 267- 3000	wpio@gate. net

### 2. Contact Representative

Name	Organization
Randy Henry, Henry.	Florida Public Radio, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 505 505 Josephine St	Titusville	FL	32796	+1 (321) 267-3000	wpio@gate.net

## 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 boaindirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No	

#### (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
Florida Public Radio Inc	0001811231

Fac. ID No.	Call Sign	City	State	Service
21787	WPIO	TITUSVILLE	FL	FM
21790	KSKB	BROOKLYN	IA	FM
21791	KREJ	MEDICINE LODGE	KS	FM
21792	WEGS	MILTON	FL	FM
51316	WEJF	PALM BAY	FL	FM
83614	KSNS	MEDICINE LODGE	KS	FM
89697	WKFA	ST. CATHERINE	FL	FM
173498	KNJT	COLDWATER	KS	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.

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, 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	0001811231	0001811231		
Entity Name	Florida Public Radio Inc	Florida Public Radio Inc		
Address	ddress PO Box 505			
	Street 1	505 Josephine St		
	Street 2			
		·		

	City	Titusville	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32796	
	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	Voting	0.0%	
(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	or more broadcast stations	No

Ownership Information			
FRN	9990148560		
Name	Randy Henry		
Address	РО Вох		
	Street 1	505 Josephine St	
	Street 2		
	City	Titusville	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32796-2734	
	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	Broadcast Tech		
By Whom Appointed or Elected	Board of Directors		
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 from 0.0 to 100.0)	Voting	20.0%	
	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	9990148561			
Name	Carol Henry			
Address	РО Вох			
	Street 1	110 La Grange Ave		
	Street 2			
	City	Titusville		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	32796		
	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	Nonprofit volunteer			
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	20.0%		
(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	n attributable interest in one o	r more broadcast stations	No	

Ownership Information		
FRN	9990148563	
Name	Harry Shetler	
Address	PO Box	

	Street 1	5470 Harrison Rd	
	Street 2		
	City	Mims	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32754	
	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	Broadcast Tech		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship US  Gender Male		
Ethnicity, and Race Information (Natural			
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(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	r more broadcast stations No	

Ownership Information		
FRN	9990148564	
Name	Betty Evans	
Address	РО Вох	
	Street 1 4317 Lantern Drive	
	City Titusville  State ("NA" if non-U.S. address)  Zip/Postal Code 32796  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	Homemaker		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	<b>Citizenship</b> US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	20.0%	
(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	or more broadcast stations No	

FRN	9990148565	
	9990148565	
Name	David Talley	
Address	PO Box	
	Street 1	8344 Yancey St
	Street 2	
	City	Pensacola
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	32514
	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 Tech Air Force	
By Whom Appointed or Elected	Board of Directors	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting 20.0%	
(enter percentage values from 0.0 to 100.0)  Equity 0.0%		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	
• •	nat any interests, including equinal his filing are non-attributable.  an explanation.	ty, financial, or voting	Yes	

(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.	

# 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.

File Name	Uploaded By	Attachment Type	Description
Broadcast Interests of Florida Public Radio-2019.  pdf	Applicant	Ownership Chart	Carol Henry other NCE broadcast interest

#### **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: <b>President</b> Exact Legal Title or Name of Respondent: <b>President</b> Name: <b>Randy Henry</b> Phone: <b>3212673000</b> 12/01/2021