

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000173501** Submit Date: **2021-11-30** FRN: **0026121533**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/30/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0026121533	Fleming Street Communications, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5902 SOUTHWYCK BLVD. SUITE 101	TOLEDO	ОН	43614- 1555	+1 (419) 861- 9582	debhogan1@aol. com

2. Contact Representative

Name	Organization
Debra Lynn Hogan	Fleming Street Communications, Inc.

	o	.	Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
5902 Southwyck Blvd	Toledo	ОН	43614	+1 (419) 861-9582	debhogan1@aol.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	MAR	1	95	\$85.00
				Total	\$85.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Licensee		
Nature of Respondent	Other FLEMING STREET COMMUNICATIONS, INC. IS LISTED AS A CORPORATION. DEBRA L. HOGAN ACTS AS PRESIDENT OF FSC		

(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
Fleming Street Communications, Inc.	0026121533

Fac. ID No.	Call Sign	City	State	Service
71442	WJUC	SWANTON	ОН	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.

Document Information	
Description of contract or instrument	Articles of Incorporation
Parties to contract or instrument	State of Ohio
Date of execution	09/2016
Date of expiration	No expiration date

Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation for domestic for-
	profit corporation

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.

RN	0026121533	0026121533		
Entity Name	Fleming Street Communicat	Fleming Street Communications, Inc.		
Address	РО Вох			
	Street 1	5902 SOUTHWYCK BLVD.	5902 SOUTHWYCK BLVD.	
	Street 2	SUITE 101		
	City	TOLEDO	TOLEDO	
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43614-1555		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Triba	l nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held?	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Ownership Information			
FRN	0025886185		
Name	Debra L. Hogan		
Address	РО Вох		
	Street 1	7221 Twin Lakes Road	
	Street 2		
	City	Perrysburg	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43551	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting	21.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	21.0%	
	Total assets (Equity Debt Plus)	21.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	0025884826	
Name	Charles B. Welch	
Address	PO Box	
	Street 1	250 Roseanna
	Street 2	
	City	Toledo
	State ("NA" if non-U.S. address)	ОН
	Zip/Postal Code	43615
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Officer, Director, Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting	21.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	21.0%	
	Total assets (Equity Debt Plus)	21.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No

Ownership Information				
FRN	0025886169	0025886169		
Name	Rosalind Welch			
Address	РО Вох			
	Street 1	5562 Heatherdowns Blvd		
	Street 2			
	City	Toledo		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43614		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Stockholder			
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages (enter percentage values	Voting	21.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	21.0%		
	Total assets (Equity Debt Plus)	21.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No	

FRN	0025886151		
Name	Katrina Welch-Bills		
Address	PO Box		
	Street 1	5044 Pickfair	
	Street 2		
	City	Toledo	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43615	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting	21.0%	Jointly Held?
from 0.0 to 100.0)	Equity	21.0%	
	Total assets (Equity Debt Plus)	21.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information			
FRN	0025886177		
Name	Trina R. Lyons		
Address	РО Вох		
	Street 1	1155 Rockcress Dr.	
	Street 2		
	City	Toledo	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43615	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		

Citizenship, Gender, Ethnicity, and Race	Citizenship	US			
Information (Natural Persons Only)	Gender	Female	Female		
	Ethnicity	Not Hispanic or Latino			
	Race	Black or African American			
Interest Percentages (enter percentage values	Voting	11.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	11.0%			
	Total assets (Equity Debt Plus)	11.0%			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No			

Ownership Information			
FRN	0020011185		
Name	James Wagner		
Address	PO Box	201	
	Street 1		
	Street 2		
	City	Alexandria	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	41001	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director, Stockholder		
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	5.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	5.0%	
	Total assets (Equity Debt Plus)	5.0%	
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	Yes

Yes

(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.

(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?

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.

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.

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.

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.

No

(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?

Yes

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

Family Relationships				
FRN	0025886169	Name	Rosalind Welch	
FRN	0025886151	Name	Katrina Welch-Bills	
Relationship	Siblings			

Family Relationships				
FRN	0025886177	Name	Trina R Lyons	
FRN	0025886185	Name	Debra L Hogan	
Relationship	Siblings			

Family Relationships				
FRN	0025886185	Name	Debra L Hogan	
FRN	0025884826	Name	Charles B Welch	
Relationship	Siblings			

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

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.

No

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.

SINGLE STATION OWNED BY FLEMING STREET COMMUNICATIONS, INC. DEBRA L. HOGAN, PRESIDENT

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: DEBRA L. HOGAN, PRESIDENT Name: DEBRA LYNN HOGAN Phone: 4198619582 11/30/2021