

FRN

Not Applicable

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

File Number:0000173223Submit Date:2021-11-30FRN:0019095322Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/30/2021Filing Status:Active

# **Section I - General Information**

# 1. Respondent

Entity Name

0019894328		G and S 700, LLC					
Street Address	City (and Country S. address)	if non U.	State ("NA" if non-U. S. address)	Zip Code	Phone	Email	
4051	Nonlos		EI	24102	1 (210)	foo	

4951 Gulf Shore Blvd. N LeParc	Naples	FL	34103	+1 (310) 451-4430	fcc. notices@pointbroadcastingllc. com
803					

# 2. Contact Representative

Name	Organization
David D. Oxenford	Wilkinson Barker Knauer, LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 783- 4141	doxenford@wbklaw. com

# 3. Application Filing Fee

4.	Nature of
Re	espondent

(a) Provide the following information about the Responden 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	Validation and resubmission of a previously filed biennial report (certifying no changes from the previously filed biennial report) 0000104404

"As of"	date
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## 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		
LC Media LP			0019095322		
Fac. ID No.	Call Sign	City	State	Service	
67354	KQIE	REDLANDS	CA	FM	

# Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable Lu disclosed by the licensee of the attributable JSA, or a network af	set forth in 47 C.F.R. Section 73 ocal Marketing Agreements (LMA brokering station on its ownershi filiation agreement, check the ap se Respondents that only hold au	ull power television, AM, and/or FM stations should list all .3613(a) through (c) for the facility or facilities listed on this As) and attributable Joint Sales Agreements (JSAs) must be p report. If the agreement is an attributable LMA, an propriate box. Otherwise, select "Other." Non-Licensee uthorizations for Class A television and/or low power television on.		
2. Ownership Interests	<ul> <li>(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.</li> <li>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).</li> </ul>				
	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	0019894328			
	Entity Name	G and S 700, LLC			
	Address	PO Box			
		Street 1	4951 Gulf Shore Blvd. N		
		Street 2	LeParc 803		

	City	Naples			
	State ("NA" if non-U.S. address)	FL			
	Zip/Postal Code	34103			
	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	Voting	0.0%	Jointly Held? No		
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 c	or more broadcast stations	No		

# **Ownership Information**

FRN	0019894369			
Entity Name	GLS Partners, LP			
Address	PO Box	4500		
	Street 1			
	Street 2			
	City	Wilmington		
	State ("NA" if non-U.S. address)	DE		
	Zip/Postal Code	19087		
	Country (if non-U.S. address)	United States		
Listing Type	Positional Interests LC/LLC/PLLC Member			
Positional Interests (check all that apply)				
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	78.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	78.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No	

Ownership Information				
FRN	0019894591			
Name	George L. Schrenk	George L. Schrenk		
Address	PO Box	PO Box		
	Street 1	4951 Gulf Shore Blvd. N		
	Street 2	LEPARC 803		
	City	Naples		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34103		
	Country (if non-U.S.     United States       address)     United States			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - Manager			
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	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	Νο	

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Ownership Information		
FRN	0019894401	
Entity Name	Fedelta Capitello, LLC	
Address	PO Box	
	Street 1	17501 Biscayne Blvd
	Street 2	Suite 300
	City	North Miami Beach
	State ("NA" if non-U.S. FL address)	
	Zip/Postal Code	33160
	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		
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	17.0%	Jointly Held? No
	Equity	17.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

# Ownership Information FRN 0019894484 Name Malcolm Collins

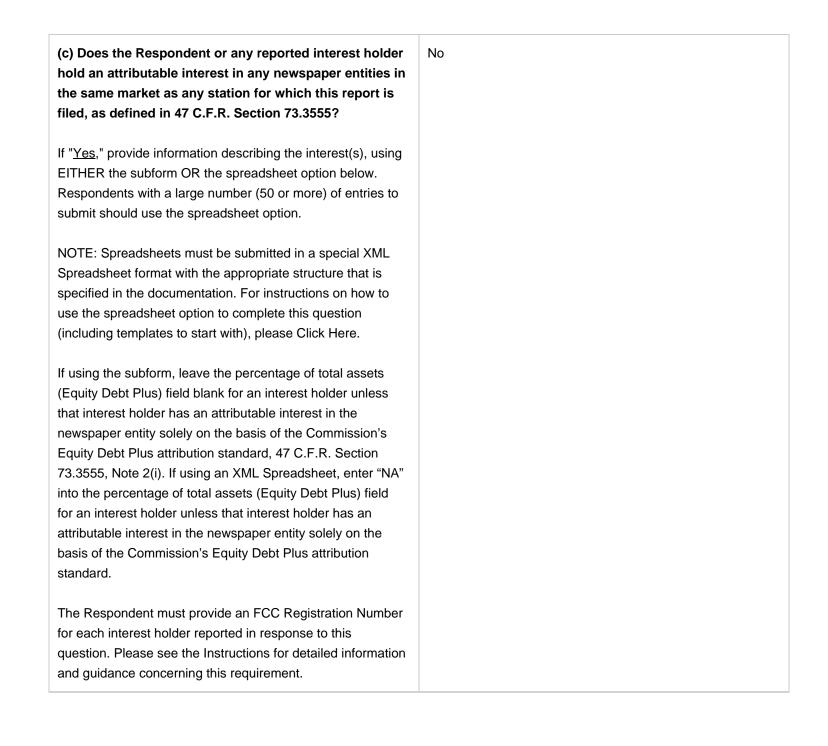
Name	Malcolm Collins		
Address	PO Box		
	Street 1	4951 Gulf Shore Blvd. N	
	Street 2 LEPARC 803		
	City	Naples	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34103	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	3.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	3.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No

**Ownership Information** 

FRN	0019894500	
Name	Miles Collins	

Address	PO Box				
	Street 1	4951 Gulf Shore Blvd. N	4951 Gulf Shore Blvd. N		
	Street 2	LEPARC 803			
	City	Naples			
	State ("NA" if non-U.S. address)	FL			
	Zip/Postal Code	34103	34103		
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member				
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	3.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	3.0%			
	Total assets (Equity Debt Plus)				
		or more broadcast stations	No		

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

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

### Family Relationships

FRN	0019894591	Name	George L Schrenk
FRN	0019894500	Name	Miles Collins
Relationship	Parent/Child		

### **Family Relationships**

FRN	0019894484	Name	Malcolm Collins
FRN	0019894500	Name	Miles Collins
Relationship	Siblings		

### **Family Relationships**

FRN	0019894484	Name	Malcolm Collins
FRN	0019894591	Name	George L Schrenk
Relationship	Parent/Child		

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

If "<u>Yes</u>," 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: <b>FCC Compliance Officer</b> Exact Legal Title or Name of Respondent: <b>Marissa Garcia</b> Name: <b>Marissa Marie Garcia</b> Phone: <b>8056548743</b> 11/30/2021