

(REFERENCE COPY - Not for submission) Request to Extend a Silent Authority of a Full Power AM Station Application

 File Number:
 BLESTA-20080204ACY
 Submit Date:
 02/04/2008
 Lead Call Sign:
 WASG
 Facility ID:
 51141

FRN: 0021312038

Service: Full Power AM Purpose: STA Extension Status: Granted Status Date: 03/17/2008 Filing Status: Inactive

Attachments Are attachments (other than associated schedules) being filed with this application? Applicant Information Applicant Name, Type, and Contact Information: Applicant So AM, INC Address Phone Email Applicant Type, and this application? 550 AM, INC 2070 N. PALAFOX +1 (850) 432-1232 MGLIN@AOL.COM OTH Applicant Doing Business As: 550 AM, INC 2070 N. PALAFOX +1 (850) 432-1232 MGLIN@AOL.COM OTH	General Information	Section	Question	Respons	Response		
Information Applicant Address Phone Email Applicant Type 550 AM, INC 2070 N. PALAFOX +1 (850) 432-1232 MGLIN@AOL.COM OTH		Attachments		es) being			
ApplicantAddressPhoneEmailApplicant Type550 AM, INC Applicant2070 N. PALAFOX PENSACOLA, FL 32501+1 (850) 432-1232MGLIN@AOL.COMOTH		Applicant Name, Type, and Contact Information					
Applicant PENSACOLA, FL 32501	Information	Applicant	Address	Phone	Email	Applicant Type	
		Applicant	PENSACOLA, FL 32501	+1 (850) 432-1232	2 MGLIN@AOL.COM	ОТН	
Contact Contact Name Address Phone Email Contact Typ		Contact Name	Address	Phone	Email	Contact Type	
(1) DAVID TILLOTSON 4606 CHARLESTON +1 (202) 625- DTLAW@STARPOWER. Legal	-	LAW OFFICE OF DAVID	TERRACE, N.W. WASHINGTON, DC 20007- 1911	(<i>)</i>		Legal Representative	
Extension Section Question Response Response		Section	Question		Respons	e	
Extension Request Reason for going silent: Technical	Request	Extension Request	Reason for going silent:		Technical		

Certification	Section	Question	Response
	General Certification Statements	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	

Please enter the new requested expiration date:

	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	MICHAEL B. GLINTER
Authorized Party to Sign	 FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503). 	
	other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002(c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	

Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status
	<u>1231974_614694.</u> <u>txt</u>	Applicant	All Purpose	REASON FOR EXTENSION	Done with Virus Scan and/or Conversion