

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06455

**Entity Name:** OKALOOSA PUBLIC RADIO, INC.

**Current Principal Place of Business:**

957 HWY C4-A  
BAKER, FL 32531

**FILED**  
**May 01, 2018**  
**Secretary of State**  
**CC3443930846**

**Current Mailing Address:**

PO BOX 189  
BAKER, FL 32531 US

**FEI Number: 59-2773279**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

THOMPSON, EARL RAY  
954 HWY C4-A  
BAKER, FL 32531 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name THOMPSON, EARL R.  
Address 954 HWY C4-A  
City-State-Zip: BAKER FL 32531

Title VD  
Name BOLTON, MELODY A.  
Address 803 MELTON RD  
City-State-Zip: BAKER FL 32531

Title D  
Name THOMPSON, JEFFREY E  
Address 954 HWY C4-A  
City-State-Zip: BAKER FL 32531

Title D  
Name HICKS, COLIN R  
Address 3541 HWY 29 NORTH  
City-State-Zip: CANTONMENT FL 32533

Title STD  
Name THOMPSON, RUTH H.  
Address 954 HWY C4-A  
City-State-Zip: BAKER FL 32531

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RUTH H. THOMPSON**

**SEC/TREASURER**

**05/01/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date