

Federal Communications Commission Washington, D.C. 20554 <p style="text-align: center;">FCC 323</p>	Approved by OMB 3060-0010 (June 2002)	FOR FCC USE ONLY <hr/> FOR COMMISSION USE ONLY FILE NO. - 20090520AEH
<p>OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS</p> <p>Read INSTRUCTIONS Before Filling Out Form</p>		

Section I - General Information

1.	Legal Name of the Applicant EDWARDS COMMUNICATIONS, LC		
	Mailing Address ATTN: JERRY EDWARDS 125 EAGLE'S NEST DRIVE		
	City SENECA	State or Country (if foreign address) SC	ZIP Code 29678 -
	Telephone Number (include area code) 0000000000	E-Mail Address (if available)	
	FCC Registration Number: 0004770764	Call Sign WIDL	Facility ID Number 29678
2.	Contact Representative (if other than Licensee/Permittee) JOHN NEELY, ESQ.		Firm or Company Name MILLER AND NEELY, P.C.
	Telephone Number (include area code) 3019864160	E-Mail Address (if available) JOHNSNEELY@YAHOO.COM	
3.	Name of entity, if other than licensee or permittee, for which report is filed		
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code
	Telephone Number (include area code)	E-Mail Address (if available)	
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input checked="" type="radio"/> Governmental Entity <input type="radio"/> Fee-exempt Report <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)		

Section II - Ownership Information

5. a. <input checked="" type="radio"/> Biennial	b. <input type="radio"/> Transfer of Control or Assignment of License/Permit	c. <input type="radio"/> Other
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d. Amendment to pending application

for the following stations:

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
WIDL	29678	CARO MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WKYO	29679	CARO MI	AM

Call Letters	Facility ID Number	Location (City/State)	Class of service
KTAK	56590	RIVERTON WY	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
KVOW	56591	RIVERTON WY	AM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WHSB	15509	ALPENA MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WHAH	29286	ROGERS CITY MI	AM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WHAH-FM	29289	ROGERS CITY MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service

WWTH	61813	OSCODA MI	FM
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All of the information furnished in this Report is accurate as of 5/5/2009 (Date must comply with 47 C.F.R. Section 73.3615(a), i.e., information must be current within 60 days of filing of this report, when 5(a) below is checked.)

This Report is filed for (check one)

6. Respondent is:

<input type="radio"/> Sole proprietorship	<input type="radio"/> Not-for-profit corporation	<input type="radio"/> Limited partnership
<input type="radio"/> For-profit corporation	<input type="radio"/> General partnership	<input checked="" type="radio"/> Other

If "Other", describe nature of the respondent in an Exhibit. [Exhibit 1]

7. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
OPERATING AGREEMENT		01/01/1998	

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
ARTICLES OF ORGANIZATION		12/05/1997	

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
BUY-SELL AGREEMENT	COMPANY AND MEMBERS	01/01/1998	

8. Capitalization (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Capitalization Information]

9. (a.) List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.
 [Enter Owner Information]

Owner Information

List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

1. Name and address of respondent and each party to the respondent holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the respondent first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.
2. Gender (male or female).
3. Ethnicity (check one).
4. Race (select one or more).
5. Citizenship.
6. Positional interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's **equity/debt plus** standard, etc.
7. Percentage of votes.
8. Percentage of total assets (equity debt plus).

1. Name and Address	EDWARDS PUBLICATIONS, INC., SENECA, SC (VOTED BY JERRY EDWARDS)
2. Gender (male or female)	N/A
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White
5. Citizenship	
6. Positional Interest	MEMBER
7. Percentage of votes	100.00
8. Percentage of total assets	100.00

(equity debt plus)	
1. Name and Address	JERRY EDWARDS, SENECA, SC
2. Gender (male or female)	Male
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White
5. Citizenship	US
6. Positional Interest	PRESIDENT
7. Percentage of votes	0.00
8. Percentage of total assets (equity debt plus)	0.00

1. Name and Address	EDWARDS COMMUNICATIONS, LC; SENECA, SC
2. Gender (male or female)	N/A
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White
5. Citizenship	
6. Positional Interest	RESPONDENT
7. Percentage of votes	0.00
8. Percentage of total assets (equity debt plus)	0.00

(b)	Respondent certifies that equity and financial interests not set forth in response to Question 9(a) are non-attributable.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 2]
(c)	Is the respondent or any party holding an attributable interest in the respondent also the holder of an attributable interest in any other broadcast station or in any cable or newspaper entities in the same market or with overlapping signals in the same broadcast service, as described in 47 C.F.R. Sections 73.3555 and 76.501? If "Yes", submit an Exhibit identifying the holder of that other attributable interest,	<input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 3]

	listing the call signs, locations and facilities identifiers of such other broadcast stations, and describing the nature and size of the ownership interest and the positions held in the other broadcast, cable or newspaper entities.	
(d)	Are any of the individuals listed in response to Question 9(a) related as parent-child, husband-wife, brothers and sisters?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	If "Yes", submit an Exhibit setting forth full information as to the family relationship	[Exhibit 4]
(e)	Is respondent seeking an attribution exemption for any officer or director with duties unrelated to the licensee or permittee?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	If "Yes", submit an Exhibit identifying that individual by name and title, fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	[Exhibit 5]

SECTION III - CERTIFICATION

I certify that I am PRESIDENT

(Official Title)

of EDWARDS COMMUNICATIONS, L.C.

(Exact legal title or name of respondent)

and 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.

(Date of certification must be within 60 days of the date shown in Question 5, Section II and in no event prior to that date.)

Signature JERRY EDWARDS	Date 5/20/2009
Telephone Number of Respondent (Include area code) 0000000000	

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 1

Description: LIMITED LIABILITY COMPANY

SEE ATTACHMENT 1 FOR A COPY OF THE HOLDING COMPANY OWNERSHIP REPORT.

Attachment 1

Description
<u>Holding Company Ownership Report</u>

Federal Communications Commission Washington, D.C. 20554 <p style="text-align: center;">FCC 323</p>	Approved by OMB 3060-0010 (June 2002)	FOR FCC USE ONLY
<p>OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS</p> <p>Read INSTRUCTIONS Before Filling Out Form</p>		FOR COMMISSION USE ONLY FILE NO. -

Section I - General Information

1.	Legal Name of the Applicant EDWARDS COMMUNICATIONS, LC		
	Mailing Address ATTN: JERRY EDWARDS 125 EAGLE'S NEST DRIVE		
	City SENECA	State or Country (if foreign address) SC	ZIP Code 29678 -
	Telephone Number (include area code) 0000000000	E-Mail Address (if available)	
	FCC Registration Number:	Call Sign	Facility ID Number 0
2.	Contact Representative (if other than Licensee/Permittee) JOHN NEELY, ESQ.		Firm or Company Name MILLER AND NEELY, P.C.
	Telephone Number (include area code) 3019864160	E-Mail Address (if available) JOHNSNEELY@YAHOO.COM	
3.	Name of entity, if other than licensee or permittee, for which report is filed EDWARDS PUBLICATIONS, INC.		
	Mailing Address ATTN: JERRY EDWARDS 125 EAGLE'S NEST DRIVE		
	City SENECA	State or Country (if foreign address) SC	ZIP Code 29678 -
	Telephone Number (include area code) 0000000000	E-Mail Address (if available)	
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input checked="" type="radio"/> Fee-exempt Report <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)		

Section II - Ownership Information

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5. a. Biennial b. Transfer of Control or Assignment of License/Permit c. Other
 d. Amendment to pending application

for the following stations:

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
WHSB	15509	ALPENA MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WHAK	29286	ROGERS CITY MI	AM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WHAK-FM	29289	ROGERS CITY MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WWTH	61813	OSCODA MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WIDL	29678	CARO MI	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WKYO	29679	CARO MI	AM

Call Letters	Facility ID Number	Location (City/State)	Class of service
KTAK	56590	RIVERTON WY	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
KVOW	56591	RIVERTON WY	AM

All of the information furnished in this Report is accurate as of 5/5/2009 (Date must comply with 47 C.F.R. Section 73.3615(a), i.e., information must be current within 60 days of filing of this report, when 5(a) below is checked.)

This Report is filed for (check one)

6. Respondent is:

Sole proprietorship Not-for-profit corporation Limited partnership
 For-profit corporation General partnership Other

If "Other", describe nature of the respondent in an Exhibit. [Exhibit 1]

7. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
ARTICLES OF INCORPORATION (AS AMENDED)		8/14/1978	PERPETUAL

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
BYLAWS			

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
BUY-SELL AGREEMENT	COMPANY AND SHAREHOLDERS	12/31/1992	

8. Capitalization (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Capitalization Information]

Capitalization

Capitalization (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

Class of stock (preferred, common or other)	Voting or Non-voting	Number of Shares			
		Authorized	Issued and Outstanding	Treasury	Unissued
COMMON	VOTING	100,000	14,000		86,000

9. (a.) List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

1. Name and address of respondent and each party to the respondent holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the respondent first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.
2. Gender (male or female).
3. Ethnicity (check one).
4. Race (select one or more).
5. Citizenship.
6. Positional interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attributable under the Commission's **equity/debt plus** standard, etc.
7. Percentage of votes.
8. Percentage of total assets (equity debt plus).

1. Name and Address	EDWARDS PUBLICATIONS, INC., SENECA, SC
2. Gender (male or female)	N/A
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White
5. Citizenship	
6. Positional Interest	RESPONDENT
7. Percentage of votes	0
8. Percentage of total assets (equity debt plus)	0

1. Name and Address	BOB EDWARDS; SENECA, SC
2. Gender (male or female)	Male
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White
5. Citizenship	US
6. Positional Interest	VICE PRESIDENT/DIRECTOR
7. Percentage of votes	10.25
8. Percentage of total assets (equity debt plus)	10.25

1. Name and Address	JOYCE EDWARDS; SENECA, SC
2. Gender (male or female)	Female
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White
5. Citizenship	US
6. Positional Interest	SEC./TREAS./DIRECTOR
7. Percentage of votes	10.25

8. Percentage of total assets (equity debt plus)	10.25
1. Name and Address	JERRY EDWARDS; SENECA, SC
2. Gender (male or female)	Male
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White
5. Citizenship	US
6. Positional Interest	PRESIDENT/DIRECTOR
7. Percentage of votes	39.75
8. Percentage of total assets (equity debt plus)	39.75

1. Name and Address	STEVE EDWARDS; SENECA, SC
2. Gender (male or female)	Male
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White
5. Citizenship	US
6. Positional Interest	DIRECTOR
7. Percentage of votes	39.75
8. Percentage of total assets (equity debt plus)	39.75

(b)	Respondent certifies that equity and financial interests not set forth in response to Question 9(a) are non-attributable.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 2]
(c)	Is the respondent or any party holding an attributable interest in the respondent also the holder of an attributable interest in any other broadcast station or in any cable or newspaper entities in the same market or with overlapping signals in the same broadcast service, as described in 47 C.F.R. Sections 73.3555 and 76.501?	<input type="radio"/> Yes <input checked="" type="radio"/> No

If "Yes", submit an Exhibit identifying the holder of that other attributable interest, listing the call signs, locations and facilities identifiers of such other broadcast stations, and describing the nature and size of the ownership interest and the positions held in the other broadcast, cable or newspaper entities.	[Exhibit 3]
(d) Are any of the individuals listed in response to Question 9(a) related as parent-child, husband-wife, brothers and sisters?	<input checked="" type="radio"/> Yes <input type="radio"/> No
If "Yes", submit an Exhibit setting forth full information as to the family relationship	[Exhibit 4]
(e) Is respondent seeking an attribution exemption for any officer or director with duties unrelated to the licensee or permittee?	<input type="radio"/> Yes <input checked="" type="radio"/> No
If "Yes", submit an Exhibit identifying that individual by name and title, fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	[Exhibit 5]

SECTION III - CERTIFICATION

I certify that I am PRESIDENT

(Official Title)

of EDWARDS PUBLICATIONS, INC.

(Exact legal title or name of respondent)

and 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.

(Date of certification must be within 60 days of the date shown in Question 5, Section II and in no event prior to that date.)

Signature JERRY EDWARDS	Date 5/9/2009
Telephone Number of Respondent (Include area code) 0000000000	

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 4

Description: FAMILY RELATIONSHIP

BOB AND JOYCE EDWARDS ARE MARRIED; JERRY AND STEVE EDWARDS ARE THEIR SONS.

Attachment 4
