2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 111977

Entity Name: TIMES PUBLISHING COMPANY

FILED Mar 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
490 1ST. AVENUE S. SAINT PETERSBURG, FL 33701				490 FIRST AVENUE S. SAINT PETERSBURG, FL 33701				
Current Mailing Address:				New Mailing Address:				
490 1ST. AVENUE S. SAINT PETERSBURG, FL 33701				490 FIRST AVENUE S. SAINT PETERSBURG, FL 33701				
FEI Number:	59-0482470	FEI Number Applied For ()	FEI Numl	ber Not Applic	cable ()	Certificate	of Status Desired()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
CORTY, ANDREW P 490 FIRST AVENUE SOUTH ST. PETERSBURG, FL 33701 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.								
SIGNATUR								
Electronic Signature of Registered Agent				Date				
Election Cam		Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	CD () E TASH, PAUL C 490 FIRST AVEN SAINT PETERSB		1	Title: Name: Address: City-St-Zip:	()	Change()	Addition	
Title: Name: Address: City-St-Zip:	VSD () E CORTY, ANDREV 490 FIRST AVEN SAINT PETERSB	UE SOUTH	1	Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	VD ()E PETTY, MARTHA 490 FIRST AVEN SAINT PETERSB	UE SOUTH	1	Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	VD ()E BROWN, NEIL S 490 FIRST AVEN SAINT PETERSB	UE SOUTH	1	Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	D ()E BUCKLEY, STEP 490 1ST AVE S SAINT PETERSB		1	Title: Name: Address: City-St-Zip:	TVD (X) JONES, JANA 490 FIRST AVE SAINT PETERSE			
Title: Name: Address: City-St-Zip:	D () E DELUCA, JOSEP 490 1ST AVE S SAINT PETERSB		1	Title: Name: Address: City-St-Zip:	VD (X) DELUCA, JOSEF 490 FIRST AVE SAINT PETERSE	S		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW P. CORTY S 03/18/2009