

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854865

FILED
Feb 17, 2005
Secretary of State

Entity Name: THE NEW YORK TIMES COMPANY

Current Principal Place of Business:

229 WEST 43RD ST
NEW YORK, NY 10036

New Principal Place of Business:

Current Mailing Address:

C/O LEGAL DEPT.
229 W 43D STREET
NEW YORK, NY 10036

New Mailing Address:

FEI Number: 13-1102020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: SULZBERGER, ARTHUR O JR
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: S () Delete
Name: BRAUER, RHONDA L
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: V () Delete
Name: LESSERSOHN, JAMES C
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: DP () Delete
Name: LEWIS, RUSSELL T
Address: 229 W 43RD STREET
City-St-Zip: NEW YORK, NY 10036

Title: V () Delete
Name: AUGUSTINE, CYNTHIA H
Address: 229 W 43RD STREET
City-St-Zip: NEW YORK, NY 10036

Title: VD () Delete
Name: GOLDEN, MICHAEL
Address: 229 W 43RD STREET
City-St-Zip: NEW YORK, NY 10036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ROBINSON, JANET L
Address: 229 W 43RD STREET
City-St-Zip: NEW YORK, NY 10036

Title: EVP (X) Change () Addition
Name: FORMAN, LEONARD P
Address: 229 W 43RD STREET
City-St-Zip: NEW YORK, NY 10036

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RHONDA L. BRAUER

S

02/17/2005

Electronic Signature of Signing Officer or Director

_____ Date