

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001375

FILED  
Mar 26, 2012  
Secretary of State

**Entity Name:** THE ROBERT K. SCRIPPS FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

11382 PROSPERITY FARMS RD  
SUITE 227  
PALM BEACH GARDENS, FL 334103463 US

**New Principal Place of Business:**

**Current Mailing Address:**

384 WEST SHORE DR  
WYCKOFF, NJ 074812434 US

**New Mailing Address:**

FEI Number: 65-0824010

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FORBES, PHILIP H  
11382 PROSPERITY FARMS RD  
SUITE 227  
PALM BEACH GARDENS, FL 334103463 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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: SCRIPPS, ROBERT K  
Address: 384 WEST SHORE DR  
City-St-Zip: WYCKOFF, NJ 074812434 US

Title: SD  
Name: SCRIPPS, ELIZABETH H  
Address: 384 WEST SHORE DR  
City-St-Zip: WYCKOFF, NJ 074812434 US

Title: VD  
Name: SCRIPPS LAFLAMME, SUZANNE  
Address: 100 PRINCIPE DE PAZ  
City-St-Zip: SANTA FE, NM 87508 US

Title: VD  
Name: SCRIPPS BENEVENTO, CHRISTINA  
Address: 6 WARING LANE  
City-St-Zip: NEW PALTZ, NY 12561 US

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: ROBERT K. SCRIPPS

PTD

03/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date