

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P09078 (7)
1. Corporation Name
REUTERS AMERICA INC.

Principal Place of Business 1700 BROADWAY NEW YORK NY 10019-5905	Mailing Address 1700 BROADWAY NEW YORK NY 10019-5905
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified 02/13/1986	
21		26	1a Reuters America Inc.	4. FEI Number 13-3320829	Applied For Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc. Legal Dept - 40th Fl.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
23	City & State	28	City & State NY NY	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
24	Zip	25	Country	29	30
				10019	New York

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORP. SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Assistant Secy
NAME	SANDERSON, MICHAEL S	1.2 NAME	Rochelle Friedlich
STREET ADDRESS	1700 BROADWAY	1.3 STREET ADDRESS	1700 B'way
CITY-ST-ZIP	NEW YORK NY 10019	1.4 CITY-ST-ZIP	NY NY 10019
TITLE	D	2.1 TITLE	
NAME	GLOER, THOMAS H	2.2 NAME	
STREET ADDRESS	1700 BROADWAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	TURNER, DAVID	3.2 NAME	
STREET ADDRESS	1700 BROADWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	
NAME	HARMON, JAMES	4.2 NAME	
STREET ADDRESS	1700 BROADWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	4.4 CITY-ST-ZIP	
TITLE	Assistant	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rochelle Friedlich Asst Secy 1/29/98

CR2E034 (10/97)