FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90166 005 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S87623

1. Entity Name
Business Journal Publications, Inc.

DO NOT WRITE IN THIS SPACE

656496

2. Principal Place of Business	3. Mailing Address
120 W. Morehead St.	Same
Suite, Apt. #, etc. Suite 400	Suite, Apt. #, etc.
City & State Charlotte, NC	City & State
Zip 28202 Country USA	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3089188 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name C T Corporation System

Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road

City Planatation FL Zip Code 33324

8. 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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Shaw, Ray, President & CEO 120 W. Morehead St. Charlotte, NC 28202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Whitney Shaw 120 W. Morehead Street Charlotte, NC 28202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer George Guthinger 120 W. Morehead Street Charlotte, NC 28202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director S. I. Newhouse, Jr. 4 Times Square New York, NY 10036
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/01)

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

(SIGNATURE): _____ George Guthinger 4/24/02 704/973-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #