

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000075352

Entity Name: SOCIAL NEWS DESK, INC.

Current Principal Place of Business:

5168 NW 58TH STREET
GAINESVILLE, FL 32653

Current Mailing Address:

5168 NW 58TH STREET
GAINESVILLE, FL 32653 US

FEI Number: 27-3890262

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, KIMBERLY B
5168 NW 58TH ST
GAINESVILLE, FL 32653 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT, CEO
Name BARR, EMILY
Address 5320 SOUTH UNIVERSITY AVENUE
City-State-Zip: CHICAGO IL 60615

Title VP
Name DEFOE, ELISA
Address 5168 NW 58TH STREET
City-State-Zip: GAINESVILLE FL 32653

Title DIRECTOR, TREASURER
Name ETIENNE, MARCIA
Address 46611 DARWOOD COURT
City-State-Zip: PLYMOUTH MI 48170

Title DIRECTOR, ASSISTANT TREASURER
Name JONES, HAL S
Address 3725 UPTON STREET, NW
City-State-Zip: WASHINGTON DC 20016

Title DIRECTOR, ASSISTANT SECRETARY
Name MADDREY, NICOLE
Address 5168 NW 58TH STREET
City-State-Zip: GAINESVILLE FL 32653

Title DIRECTOR, VP, GENERAL COUNSEL & SECRETARY
Name SCHMID WHITING, HEIDI
Address 5168 NW 58TH STREET
City-State-Zip: GAINESVILLE FL 32653

Title PRESIDENT
Name WILSON, KIMBERLY
Address 5168 NW 58TH STREET
City-State-Zip: GAINESVILLE FL 32653

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HAL S JONES

ASSISTANT TREASURER 04/01/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date