

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90191 023 ***150.00

DOCUMENT # 113698

1. Entity Name *

NEWS-JOURNAL CORPORATION

Principal Place of Business

**901 6TH STR
 DAYTONA BEACH FLA 32117-8099
 US**

Mailing Address

**% HERBERT M DAVIDSON, JR
 PO BOX 2831
 DAYTONA BEACH FL 32120-2831
 US**

2. Principal Place of Business

3. Mailing Address

46 David R. Kendall

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 2831

City & State

City & State

Daytona Beach, FL

Zip

Country

Zip

Country

32120

US

4. FEI Number

59-0376230

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KENDALL, DAVID R
 901 SIXTH STREET
 DAYTONA BEACH FL 32117**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ASVD
 NAME: KANEY, GEORGIA M. Delete
 STREET ADDRESS: 901 6TH ST
 CITY-ST-ZIP: DAYTONA BCH. FL 32117

TITLE: DV
 NAME: Kendall, David R. Change Addition
 STREET ADDRESS: 901 Sixth Street
 CITY-ST-ZIP: Daytona Beach, FL 32117

TITLE: ASDT
 NAME: DAVIDSON, MARC L. Delete
 STREET ADDRESS: 901 6TH ST.
 CITY-ST-ZIP: DAYTONA BCH. FL 32117

TITLE: D
 NAME: Truilo, Robert Change Addition
 STREET ADDRESS: 901 Sixth Street
 CITY-ST-ZIP: Daytona Beach, FL 32117

TITLE: ASVD
 NAME: COBB, THOMAS T Delete
 STREET ADDRESS: 901 6TH ST
 CITY-ST-ZIP: DAYTONA BCH. FL 32117

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: SD
 NAME: KANEY, JONATHAN D., JR. Delete
 STREET ADDRESS: 901 6TH ST
 CITY-ST-ZIP: DAYTONA BCH., FL 00000

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: PD
 NAME: DAVIDSON, HERBERT M JR Delete
 STREET ADDRESS: 901 6TH ST
 CITY-ST-ZIP: DAYTONA BCH., FL 00000

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: AS
 NAME: DAVIDSON TUILO, JULIA Delete
 STREET ADDRESS: 901 SIXTH ST
 CITY-ST-ZIP: DAYTONA BEACH FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

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 Block 12 if changed, or on an attachment with an address, with or other title empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David R. Kendall **David R. Kendall**

Date

1-17-01 904-252-1511

Daytime Phone #

CR2E034 (10/00)