

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
STREET ADDRESS
CITY-ST-ZIP

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

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

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

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

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

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

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

Date

Daytime Phone #

CR2E034 (10/00)