2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 113698

FILED Jul 19, 2004 Secretary of State

Entity Name: NEWS-JOURNAL CORPORATION

,	ic. NEWO 0	OURNAL CORPORATION					
Current Principal Place of Business:				New Principal Place of Business:			
901 6TH STR DAYTONA BEACH FLA, 321178099 US				901 6TH STREET DAYTONA BEACH, FL 321178099 US			
Current Mailing Address:				New Mailing Address:			
P O BOX 2 DAYTONA	831 BEACH, FL 3	32120 US					
FEI Number:	59-0376230	FEI Number Applied For()) FEI Nun	nber Not Appl	licable ()	Certificate of	Status Desired ()
Name and	Address of C	Current Registered Agen	t:	Name and	Address of	New Registe	red Agent:
150 MAGN DAYTONA	OLIA AVE. BEACH, FL 3	SERVICES, INC. 32114 US submits this statement for	the purpose o	f changing i	ts registered	office or regis	tered agent, or both,
in the State							
SIGNATUR		sia Cianatura af Dagistara	l A want			Dete	
Election Cam		nic Signature of Registered g Trust Fund Contribution().	ı Agent			Date	,
		,					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	ASVD () KANEY, GEOR 901 6TH ST DAYTONA BCH			Title: Name: Address: City-St-Zip:	() Change ()Ad	ddition
Title: Name: Address: City-St-Zip:	ASDT () DAVIDSON, MA 901 6TH ST. DAYTONA BCH			Title: Name: Address: City-St-Zip:	() Change () Ad	ddition
Title: Name: Address: City-St-Zip:	ASVD () COBB, THOMA 901 6TH ST DAYTONA BCH			Title: Name: Address: City-St-Zip:	DVP (; KENDALL, DA 901 6TH ST DAYTONA BO		ddition
Title: Name: Address: City-St-Zip:) Delete FHAN D.,, JR.		Title: Name: Address: City-St-Zip:	() Change()Ad	ddition
Title: Name: Address: City-St-Zip:	PD () DAVIDSON, HE 901 6TH ST DAYTONA BEA			Title: Name: Address: City-St-Zip:	() Change () Ad	ddition
Title: Name: Address: City-St-Zip:	ASD () DAVIDSON TUI 901 SIXTH ST DAYTONA BEA			Title: Name: Address: City-St-Zip:	() Change () Ad	ddition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GEORGIA M. KANEY VP 07/19/2004