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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 347911 (0)

1. Corporation Name
FERNANDINA BEACH NEWS-LEADER, INC.

Principal Place of Business
511 ASH STREET
BOX 766
FERNANDINA BEACH FL 32034-3930
US

Mailing Address
C/O THE NEW YORK TIMES
229 W. 43RD STREET - LEGAL DEPT.
NEW YORK NY 10036-3913
US



3. Date Incorporated or Qualified 08/13/1969 6/18/69 3a. Date of Last Report 05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

4. FEI Number
59-1264427

Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

U.S. CORPORATION CO.
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	DARROW, KATHARINE P	
STREET ADDRESS	229 WEST 43RD STREET	
CITY - ST - ZIP	NEW YORK NY 10036	
TITLE	V	DELETE
NAME	GORHAM DAVID L.	
STREET ADDRESS	229 W. 43RD STREET	
CITY - ST - ZIP	NEW YORK NY 10036	
TITLE	VD	DELETE
NAME	MALLOY, FOR	
STREET ADDRESS	511 ASH STREET	
CITY - ST - ZIP	FERNANDINA BCH FL 32034	
TITLE	T	DELETE
NAME	THOMAS, RICHARD G.	
STREET ADDRESS	229 W. 43RD STREET	
CITY - ST - ZIP	NEW YORK NY 10036	
TITLE	SD	DELETE
NAME	CORWIN, LAURA J.	
STREET ADDRESS	229 W 43RD STREET	
CITY - ST - ZIP	NEW YORK NY 10036	
TITLE	DP	DELETE
NAME	WEEKS, JAMES C	
STREET ADDRESS	3414 PEACHTREE RD. NE	
CITY - ST - ZIP	ATLANTA GA 30326	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	John M. O'Brien
2.3 STREET ADDRESS	229 W 43rd ST
2.4 CITY - ST - ZIP	New York, NY 10036
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	VD MALLOY, FOY
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	T DIANE P. BAKER
4.3 STREET ADDRESS	229 W 43rd ST
4.4 CITY - ST - ZIP	NEW YORK NY 10036
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael J. Braver
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

212 556 7127

CR2E034 (9/96)

Fernandina Beach News-Leader, Inc.

Additional Officer:

Assistant Secretary
Rhonda L. Brauer
229 W. 43rd Street
New York, NY 10036