

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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AND
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95 MAY -1 PH 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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***3130.00 ***200.00

DO NOT WRITE IN THIS SPACE.

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 347962 (3)
1. Corporation Name
SEBRING NEWS SUN, INC.

Principal Place of Business Mailing Address
**2714 SE LAKEVIEW DR
P. O. DRAWER D
SEBRING FL 33870
US** **C/O LEGAL DEPT
229 W 43RD ST
NEW YORK NY 10036
US**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

3. Date Incorporated or Qualified **06/15/1969** 3a. Date of Last Report **05/01/1994**
4. FEI Number **59-1264377** 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**
6. This corporation uses liability for interjurisdictional tax under S. 159.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WEEKS, JAMES C.
STREET ADDRESS	3414 PEACHTREE RD.
CITY - ST - ZIP	ATLANTA GA 30328
TITLE	SD
NAME	CORWIN, LAURA
STREET ADDRESS	229 WEST 43RD STREET
CITY - ST - ZIP	NEW YORK NY 10036
TITLE	SD
NAME	KORAN, MICHAEL
STREET ADDRESS	229 WEST 43RD STREET
CITY - ST - ZIP	NEW YORK NY 10036
TITLE	V
NAME	GORHAM, DAVID L.
STREET ADDRESS	229 WEST 43RD STREET
CITY - ST - ZIP	NEW YORK NY 10036
TITLE	VD
NAME	ROBINETTE, JUDY
STREET ADDRESS	2714 SE LAKEVIEW DR
CITY - ST - ZIP	SEBRING FL 33870
TITLE	Y
NAME	THOMAS, RICHARD, G
STREET ADDRESS	229 W 43RD ST
CITY - ST - ZIP	NEW YORK CITY NY 10036

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	D
33 STREET ADDRESS	Katharine P. Darrow
34 CITY - ST - ZIP	229 West 43rd Street New York, NY 10036
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	33870
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	DP5/1
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *Laura J. Corwin* Laura J. Corwin **4/25/95** 212-556-5995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary

Addition - Florida

SEBRING NEWS SUN, INC.
2714 S.E. Lakeview Drive
P.O. Drawer D
Sebring, Florida 33870

12.

T
Nied, Thomas H.
229 West 43rd Street
New York, New York 10036

T
Greenough, Martha
229 West 43rd Street
New York, New York 10036