## "FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997

DOCUMENT # 385726

(5)

LAKELAND LEDGER PUBLISHING CORPORATION

Principal Place of Business 401 \$ MISSOURI AVE. BOX 408 LAKELAND FL 33802-4731		Mailing Address C/O LEGAL DEPT 229 W. 43RD ST NEW YORK NY 10036-3913				
US		US			3. Date incorporated or Qualified 07/20/1971	3a. Date of Last Report 05/01/1996
2. Principal Pl	ace of Business	2a. Mailing Address 26		·	4. FEI Number 59-1381032	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
<i>Z</i> ip	Country	Zip	Country		8. This corporation has tiability for	<del></del>
24	25	29	30		Florida Statutes	Yes No
	g. Name and Address of Curren				10. Name and Address of New Re	gistered Agent
	TED STATES CORPORATION CO	OMPANY	81	Name		
1201 HAYS STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)		
	105					
TAL	LAHASSEE FL 32301		83			
			84	City		FL 85 Zip Code
11. Pursuant to office or reagent. Lac	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Sta of Florida Such change wa ations of, Section 607.0505,	itutes, the above as authorized b Florida Statute	re-named co y the corpores.	rporation submits this statement for the pation's board of directors. I hereby access	purpose of changing its registered
SIGNATORE.	Signatore, typed or printed name of registered age	int and title if applicable (I	VOTE: Registered Ag	ent signature req	uired when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	
TETLE	SD DELETE CORWIN, LAURA J.		1.1 TITLE	]		Change Addition
NAME .	229 W 43RD STREET		1.2 NAME	1		}
STREET ADDRESS	NEW YORK NY 10036		1.3 STREET ADDRESS			ļ
C(1Y - S) - Z(P)	11" 1		1.4 CITY-	ST-ZIP		
TILE	GORHAM, DAVID L.	DELETE	2.1 TITLE	١,	V ) AL CLASSOL	Change Addition
NAME	229 W 43RD STREET		2.2 NAME		JAN M. O'BRIEN	ST '
STREET ADDRESS		NEW YORK NY 10038		t address	G.C.	
CHY-ST-7IP	T	M noise	2. 4 CITY-	ST-ZIP	New YORK NY	10036
TITLE	THOMAS, RICHARD G	DELETE	3.1 TITLE	-	Jana P RAYES	Change Addition
NAME	229 W. 43RD ST.		3.2 NAME		STANE P. BAKER	Ç
STREET ADDRESS	NEW YORK NY 10036				229 W 43 rd	1 10021
City-St-7iP	PD PD	☐ DELETE	3.4. CITY -	ST-ZIP	New YORK, NY	Change Addition
] HLF	WEEKS,JAMES C.	□ btreat	4.1 TITLE		•	Clasinge Classical
NAME	3414 PEACHTREE ROAD		4. 2 NAME	1		
STREET ADDRESS	ATLANTA GA 30326			T ADDRESS		
CITY-SI-ZIP	DV	DELETE	4.4 CITY -	SI-ZIP		Change Addition
TITLE	WHITWORTH, DON R		5.1 TETLE			FT prioride FT working
NAME CTREET ANDRESS	401 SOUTH MISSOURI AVE		5.2 NAME			
STREET ADDRESS	LAKELAND FL 33802			T ADDRESS		ł
CITY-ST-ZIP TITLE	D	☐ DELETE	5.4 CITY- 6.1 TITLE	31 · ZIP		Change Addition
NAME	DARROW, KATHARINE P	[-] SECTION	6.2 NAME			C. Sharks C. Houlion
MAME 223GOVA 144GZ	229 WEST 43RD STREET		•	T ADDRESS	•	

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.

64 CiTY-ST-ZIP

6.3 STREET ADDRESS

**NEW YORK NY 10036** 

STHEET ACCRESS

212-556 7127

**FILED** 

Apr 30 1997 8:00am

Secretary of State

Lakeland Ledger Publishing Corporation

Additional Officer:

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