## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **CORPORATION** REINSTATEMENT

FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

FILED

03 NOV -5 AM 10: 18

SECRETARY OF STATE TALLAMASSEE FLORIDA

DOCL	JMENT	# 438977

1. Corporation Name

The Bradenton Herald, Inc.

			View	1iSed	addres	S)							
2. Principal Office Address 3. Mailing Office Address;					]								
102 Manatee Ave. W.			c/o Kni	c/o Knight Ridder Tax Dept.									
Suite, Apt. #, etc. Su			Suite, Apt. #,	Suite, Apt. #, etc.									
■ PO Box 921 50 W			50 W S	San Fernando St #1200			4. Date Incorporated or Qualified To Do Business in Florida 10/26/1973						
<u></u>			City & State					onua	10/20/10	Al servi	<del></del>		
Bradenton, FL			San Jose, CA			<b>5.</b> FEI Number 59-1487839				<del>-  </del>	lied For		
,			Zip Country								_	Applicable	
			95113	5113 U.S.			CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status						
7. Name and Address of Current Registered Agent													
,	Name C	T Corporation Sy	stem			1 511	100024425221						
Street Address (P.O. Box Number is Not Acceptable)											<del>). 7</del>		
			<u> </u>	1200 S	6. Pine Island	d Rd.							
	Suite, Apt. #, Etc.												
	City DI	antation			<del></del>			State	Zip Code				
1,4,	F 16	antation			<u> </u>		_=_=	FL	33324	ļ			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503/F.S.  Signature of Registered Agent													
- <del>-</del> -		RE	GISTERED AG	SENT MUST	SIGN		; 						
9. Names	s and Street A	ddresses of Each Officer and	/or Director (Fig	orida nonpro	fit corporations must	list at lea	ast 3 directors)						
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip						
Р	Michael Tully			102 Manatee Ave W. PO Box 921			Bradenton, FL 34206-0921						
CFO	Michael F. Craig			102 Manatee Ave W. PO Box 921			Bradenton, FL 34206-0921						
D	Gary Effren			50 W. San Fernando St. Ste 1500			San Jose, CA 95113						
D	P. Anthony Ridder			50 W. San Fernando St. Ste 1500			e 1500	San Jose, CA 95113					
S	Polk Laffoon 50 W. San Fernand					St. St	e 1500	San J	ose, CA	95113			
AVP	Lynda Hauswirth 50 W. San Fernando St. Ste						e 1500 San Jose, CA 95113						
10. I certify	y that I am an	officer or director or the received	ver or trustee er	npowered to	execute this applica	tion as p	rovided for in cha	pter 607 o	r 617, F.S. I 1	further certify th	nat whe	en filing	

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Lynda Hauswirth URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

408-938-7745

Daytime Phone #