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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 491252

1. Corporation Name
KNIGHT-RIDDER, INC.

Principal Place of Business

ONE HERALD PLAZA
MIAMI FL 33132
US

Mailing Address

ONE HERALD PLAZA
MIAMI FL 33132
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 50 W. SAN FERNANDO ST

2a. Mailing Address

26 50 W. SAN FERNANDO ST

Suite, Apt. #, etc.

22 Suite 1500

Suite, Apt. #, etc.

27 Suite 1500

City & State

23 SAN JOSE, CA

City & State

28 SAN JOSE, CA

Zip

24 95113

Country

25 USA

Zip

29 95113

Country

30 USA

9. Name and Address of Current Registered Agent

HARRIS, DOUGLAS
ONE HERALD PLAZA
MIAMI FL 33101

3. Date Incorporated or Qualified

03/12/1976

4. FEI Number

38-0723657

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing

□

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

□ Yes

□ No

10. Name and Address of New Registered Agent

81 Name

82 CT CORPORATION

83 Street Address (or P.O. Box Number if Mailing Address)

1200 So. Pine Island Road

84 City

Plantation

FL

85 Zip Code

33324

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 *Barbara A. Burke*
Signature, typed or printed name of registered agent and title if applicable.

SPECIAL ASSISTANT SECRETARY

4-15-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE
NAME EFFREN, GARY
STREET ADDRESS ONE HERALD PLAZA
CITY-ST-ZIP MIAMI FL 33132

TITLE CCEO ☐ DELETE
NAME RIDDER, P. ANTHONY
STREET ADDRESS ONE HERALD PLAZA
CITY-ST-ZIP MIAMI FL 33132

TITLE VS ☒ DELETE
NAME HARRIS, DOUGLAS
STREET ADDRESS ONE HERALD PLAZA
CITY-ST-ZIP MIAMI FL 33132

TITLE SVCF ☐ DELETE
NAME JONES, ROSS
STREET ADDRESS ONE HERALD PLAZA
CITY-ST-ZIP MIAMI FL 33132

TITLE VPT ☐ DELETE
NAME SILVERGLAT, ALAN
STREET ADDRESS ONE HERALD PLAZA
CITY-ST-ZIP MIAMI FL 33132

TITLE AVP ☒ DELETE
NAME PRYOR, BRENDA R
STREET ADDRESS ONE HERALD PLAZA
CITY-ST-ZIP MIAMI FL 33132

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 50 W. SAN FERNANDO ST.
1.4 CITY-ST-ZIP SAN JOSE, CA. 95113

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 50 W. SAN FERNANDO ST.
2.4 CITY-ST-ZIP SAN JOSE, CA 95113

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME LAFFOON, POLK
3.3 STREET ADDRESS 50 W. SAN FERNANDO ST.
3.4 CITY-ST-ZIP SAN JOSE, CA 95113

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 50 W. SAN FERNANDO ST.
4.4 CITY-ST-ZIP SAN JOSE, CA 95113

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 50 W. SAN FERNANDO ST.
5.4 CITY-ST-ZIP SAN JOSE, CA 95113

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME AVP
6.3 STREET ADDRESS HAUSWIRTH, Lynda
6.4 CITY-ST-ZIP 50 W. SAN FERNANDO ST.
SAN JOSE, CA 95113

14. I 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, with all other like empowered.

SIGNATURE: *Lynda Hauswirth*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/99
Date

408-938-7745
Daytime Phone #

CR2E034 (11/98)