

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92194 046 ***158.75

DOCUMENT # 529382

1. Entity Name
KR NEWSPRINT COMPANY



Principal Place of Business
**50 WEST SAN FERNANDO ST
SAN JOSE, CA 95113 US**

Mailing Address
**KNIGHT RIDDER TAX
50 W. SAN FERNANDO ST
SAN JOSE, CA 95113 US**

90126005



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-1737735

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee Will Be \$550.00
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AT
EFFREN, GARY
50 WEST SAN FERNANDO ST
SAN JOSE, CA 95113** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V/T ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
DOWIS, DANIEL
20 WEST SAN FERNANDO ST
SAN JOSE, CA 95113** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CONNORS, MARY JEAN
50 W. SAN FERNANDO ST- STE 1500
SAN JOSE, CA 95113** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HAUSWIRTH, LYNDA
50 W. SAN FERNANDO ST- STE 1500
SAN JOSE, CA 95113** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AV ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AVP
HAVSWIRTH, LYNDA
50 W. SAN FERNANDO ST- STE 1500
SAN JOSE, CA 95113** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Yamate, Gordon
50 W. San Fernando St. Ste 1500
San Jose, CA 95113** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CEPPPOS, JEROME
50 WEST SAN FERNANDO ST
SAN JOSE, CA 95113** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lynda Hauswirth

Date

Daytime Phone #

408

938-7700

CR2E034 (10/02)