

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715668

FILED  
Jan 09, 2004  
Secretary of State

Entity Name: NEWSPAPER WITH A HEART FUND, INC.

## Current Principal Place of Business:

300 W LIME STREET  
LAKELAND, FL 33815 US

## New Principal Place of Business:

## Current Mailing Address:

C/O LEGAL DEPT  
229 W 43RD ST  
NEW YORK, NY 10036 US

## New Mailing Address:

FEI Number: 23-7022590 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
STE 105  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: SVP ( ) Delete  
Name: FORMAN, LEONARD P  
Address: 229 W. 43RD ST  
City-St-Zip: NEW YORK, NY 10036

Title: D ( ) Delete  
Name: GOLDEN, MICHAEL  
Address: 229 W. 43RD ST  
City-St-Zip: NEW YORK, NY 10036

Title: SD ( ) Delete  
Name: BRAUER, RHONDA L  
Address: 229 W. 43RD STREET  
City-St-Zip: NEW YORK, NY 10036

Title: V ( ) Delete  
Name: STOLLER, STUART  
Address: 229 W. 43RD STREET  
City-St-Zip: NEW YORK, NY 10036

Title: V ( ) Delete  
Name: LESSERSOHN, JAMES C  
Address: 229 W. 43RD STREET  
City-St-Zip: NEW YORK, NY 10036

Title: PD ( ) Delete  
Name: FITZWATER, JOHN  
Address: 229 W. 43RD STREET  
City-St-Zip: NEW YORK, NY 10036

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: RICHIERI, KENNETH A  
Address: 229 W. 43RD ST  
City-St-Zip: NEW YORK, NY 10036

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RHONDA L. BRAUER

SD

01/09/2004

Electronic Signature of Signing Officer or Director

Date