

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715668

FILED
Apr 21, 2006
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: DV () Delete
Name: RICHERI, KENNETH A
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: () Change () Addition
Name:
Address:
City-St-Zip:

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

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

Title: () Change () Addition
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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 Chapter 119, 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

04/21/2006

Electronic Signature of Signing Officer or Director

Date