

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734727

FILED
Mar 12, 2007
Secretary of State

Entity Name: FLORIDA SOCIETY OF NEWSPAPER EDITORS, INC.

Current Principal Place of Business:

2636 MITCHAM DRIVE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2636 MITCHAM DRIVE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-0138452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDINGS, HOWARD D
2636 MITCHAM DRIVE
TALLAHASSEE, FL 32308 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: VP () Delete
Name: BARTOSEK, JOHN
Address: PO BOX 24700
City-St-Zip: WEST PALM BEACH, FL 334164700

Title: D () Delete
Name: FIEDLER, TOM
Address: ONE HERALD PLAZA
City-St-Zip: MIAMI, FL 33132

Title: STD () Delete
Name: GRINSTEAD, JEANNE
Address: PO BOX 1121
City-St-Zip: SAINT PETERSBURG, FL 337311121

Title: PD () Delete
Name: KRAUTER, JOAN
Address: 102 MANATEE AVE WEST
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: LINDLEY, DON
Address: PO BOX 2831
City-St-Zip: DAYTONA BEACH, FL 321202831

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARTOSEK, JOHN
Address: PO BOX 24700
City-St-Zip: WEST PALM BEACH, FL 334164700

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

Title: VP (X) Change () Addition
Name: GRINSTEAD, JEANNE
Address: PO BOX 1121
City-St-Zip: SAINT PETERSBURG, FL 337311121

Title: ST (X) Change () Addition
Name: GOUGREAU, ROSEMARY
Address: 200 S PARKER ST
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: ROSENHAUSE, SHARON
Address: 200 E LAS OLAS BLVD
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D () Change (X) Addition
Name: TOMASIK, MARK
Address: 1939 S FEDERAL HIGHWAY
City-St-Zip: STUART, FL 34994

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: J BARTOSEK

P

03/12/2007

Electronic Signature of Signing Officer or Director

Date