

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 817245

1. Entity Name

SUN-SENTINEL COMPANY

FILED

May 01, 2000 8:00 am
Secretary of State

05-01-2000 90314 016 ***150.00

Principal Place of Business

--- E. LAS OLAS BLVD.
LAUDERDALE FL 33301-2293

Mailing Address

435 N. MICHIGAN AVE
600
CHICAGO IL 60611-4066
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1022684

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T
NAME HAMPTON, WALTER
STREET ADDRESS 200 E. LAS OLAS BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete

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

V
NAME GREENBERG, H.
STREET ADDRESS 200 E. LAS OLAS BLVD.
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

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

V
NAME GREENBERGER, S.L.
STREET ADDRESS 200 E. LAS OLAS BLVD.
CITY-ST-ZIP FT LAUDERDALE, FL 00000 ☐ Delete

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

PD
NAME GREMILLION, R
STREET ADDRESS 200 E LAS OLAS BLVD
CITY-ST-ZIP FT LAUD FL 33301 ☐ Delete

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

V
NAME EFFINGER, L
STREET ADDRESS 200 E LAS OLAS BLVD
CITY-ST-ZIP FT LAUD FL 33301 ☒ Delete

V
NAME Christie, Bob
STREET ADDRESS 200 East Las Olas Blvd
CITY-ST-ZIP Ft. Lauderdale, FL 33301 ☒ Change ☐ Addition

S
NAME KENNEY, C H
STREET ADDRESS 435 N MICHIGAN AVE
CITY-ST-ZIP CHICAGO IL 60611 ☐ Delete

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

13. 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 11 or Block 12 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

Date

Daytime Phone #

Crane Kenney

4-20-00

312-222-3277

CR2E034 (9/99)