2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# 818937

Entity Name: ORLANDO SENTINEL COMMUNICATIONS COMPANY

Current Principal Place of Business:

633 N. ORANGE AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

435 N. MICHIGAN AVENUE
SUITE #600
CHICAGO, IL 60611 US

New Mailing Address:

FEI Number: 59-1103775 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
-
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CEOD	( ) Delete
Name:	WALTZ, KATHLEEN M	
Address:	633 N ORANGE AVE	
City-St-Zip:	ORLANDO, FL 32802	
Title:	VP	( ) Delete
Name:	ASHER, MICHAEL D	
Address:	633 N. ORANGE AVE.	
City-St-Zip:	ORLANDO, FL 32802	
Title:	S	( ) Delete
Name:	KENNEY, CRANE H	
Address:	435 N. MICHIGAN AVE.	
City-St-Zip:	CHICAGO, IL 60611	
Title:	D	( ) Delete
Name:	FULLER, JACK	
Address:	435 N. MICHIGAN AVENUE	
City-St-Zip:	CHICAGO, IL 60611	
Title:	D	( ) Delete
Name:	FITZSIMONS, DENNIS J	
Address:	435 N. MICHIGAN AVE	
City-St-Zip:	CHICAGO, IL 60611	
Title:	AS	( ) Delete
Name:	HIANIK, MARK W	
Address:	435 N MICHIGAN AVE	
City-St-Zip:	CHICAGO, IL 60611	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SVP	(X) Change ( ) Addition
Name:	KHAHAIFA, AVIDO	
Address:	633 N. ORANGE AVE.	
City-St-Zip:	ORLANDO, FL 32802	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	SMITH, SCOTT C	
Address:	435 N. MICHIGAN AVENUE	
City-St-Zip:	CHICAGO, IL 60611	
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRANE H. KENNEY SECR 04/24/2006

Electronic Signature of Signing Officer or Director — Date