2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT #845028** Apr 27, 2000 8:00 am Secretary of State 1. Entity Name THE NEW YORK TIMES COMPANY MAGAZINE GROUP, INC. 04-27-2000 90011 022 ***150.00 Principal Place of Business Mailing Address 5520 PARK AVE C/O LEGAL DEPT TRUMBULL CT 06611-0395 229 W 43RD ST. NEW YORK NY 10036-3913 医水油 化氯 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 06-1012750 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required ~~ 7."Name and Address of New Registered Agent ** - ** 6. Name and Address of Current Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 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. 提供(A. C. C. V. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. SD ☐ Delete TITI F ☐ Change Addition TITLE NAME CORWIN, LAURA J STREET ADDRESS STREET ADDRESS 229 W 43RD ST CITY-ST-ZIP CITY-ST-ZIP **NEW YORK CITY NY 10036** ☐ Delete TITLE ☐ Change Addition TITLE NAME FORMAN, LEONARD P NAME STREET ADDRESS STREET ADDRESS 229 W 43RD ST CITY-ST-ZIP CITY-ST-7iP **NEW YORK NY 10036** _ Change ☐ Addition Delete ---TITLE TITLE BRAUER, RHONDA L NAME NAME STREET ADDRESS STREET ADDRESS 229 W 43RD ST CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10036** ☐ Change Addition ☐ Delete TITLE TITLE NAME O'BRIEN, JOHN M NAMÉ STREET ADDRESS STREET ADDRESS 229 WEST 43RD ST CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY VI÷... Delete TITLE Change Addition TITLE James C. Lessersohn NAME NAME TAUS, ELLEN 229 W. 43rd St STREET ADDRESS STREET ADDRESS 229 W 43RD ST CITY-ST-ZIP New York NY 10036 CITY-ST-ZIP **NEW YORK NY 10036** ☐ Change Addition ☐ Delete TITLE TITLE NAME TOBIN, ROBERT STREET ADDRESS STREET ADDRESS 229 W 43RD ST CITY-ST-ZIP CITY-ST-ZIP **NEW YORK CITY NY** 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. Rhonda L. Brauer

Rhonda L. Brauer

Rhonda L. Brauer

GNATURE: 4/13/00 212/556-7127

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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