

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854430

FILED
Apr 24, 2007
Secretary of State

Entity Name: THE NEW YORK TIMES DISTRIBUTION CORPORATION

Current Principal Place of Business:

6525 THE CORNERS PKY
SUITE 110
NORCROSS, GA 30092

New Principal Place of Business:

Current Mailing Address:

C/O LEGAL
229 WEST 43RD STREET
NEW YORK, NY 10036

New Mailing Address:

FEI Number: 59-2213034 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
TALLAHASSEE, FL 32303 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: PD () Delete
Name: HEEKIN-CANEDY, SCOTT H
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: V () Delete
Name: STOLLER, STUART
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: V () Delete
Name: ALI-KAHN, HUSSAIN
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: V () Delete
Name: LESSERSOHN, JAMES C
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: SD () Delete
Name: BRAUER, RHONDA L
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: VD () Delete
Name: RICHIERI, KENNETH A
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: V (X) Change () Addition
Name: FOLLO, JAMES M
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

Title: T (X) Change () Addition
Name: BARRIOS, GEORGE A
Address: 229 W 43RD ST
City-St-Zip: NEW YORK, NY 10036

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

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: RHONDA L. BRAUER

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04/24/2007

Electronic Signature of Signing Officer or Director

_____ Date