



**FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>		<p>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</p> <p>97 NOV 17 PM 12:17</p> 	
1. Name of Limited Partnership THE FLORIDA NEWS GROUP, LTD.		1a. DOCUMENT # A96000002004			
Mailing Address 2201 FOURTH AVENUE NORTH LAKE WORTH FL 33461		Principal Office Address 2201 FOURTH AVENUE NORTH LAKE WORTH FL 33461		3. Date Formed or Registered 10/28/1996 3a. Date of Last Report 04/16/1997 4. State or Country of Formation FL 6. FEI Number 65-0706175 7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		5a. Capital Contributions as Shown on record \$12,000,000.00 5b. Amount of Capital Contributions in FLORIDA to date: \$12,000,000.00 <input type="checkbox"/> Applied for <input checked="" type="checkbox"/> Not Applicable	

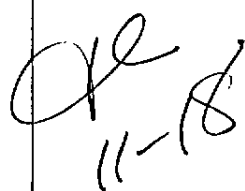
9. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE FL 32301		10. If changed, new Registered Agent/Office Name: 6500002352356--0 -11/19/97--01099--008 Street Address (P.O. Box Number is Not Acceptable): ***541.25 ***541.25 Suite, Apt. #, etc. City: FL Zip Code:	
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment):

DATE:

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) THE FLORIDA NEWS GROUP, L.C.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 2201 FOURTH AVENUE NO	11b. City, State & Zip Code LAKE WORTH FL 33461	11c. Registration/Document Number L96000001053 
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Carl Thistle Controller

Daytime Telephone Number

10/28/97
561-597-3020

C92E003 (6/97)