

2002 UNIFORM BUSINESS REPORT (UBR)

\$141.25

DOCUMENT # B99000000449

1. Entity Name

GANNETT NEW JERSEY PARTNERS L.P.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY 13 AM 8:28

Principal Place of Business

ONE GANNETT PLAZA
MELBOURNE FL 32940

Mailing Address

1100 WILSON BLVD.
ARLINGTON VA 22234



2. Principal Place of Business

3. Mailing Address

7950 JONES BRANCH DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.
TAX DEPARTMENT

DUE BY MAY 1, 2002

City & State

City & State
MCLEAN, VA 22107-0940

4. FEI Number

54-1948283

Applied For

Not Applicable

Zip

Country

Zip

22107-0940

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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.

DATE

9. Capital Contributions
as Shown on record.

\$0.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # 853512
NAME GANNETT SATELLITE INFORMATION NETWORK, INC
STREET ADDRESS 1100 WILSON BOULEVARD
CITY-ST-ZIP ARLINGTON VA 22234

13. ADDRESS CHANGES ONLY

STREET ADDRESS 7950 JONES BRANCH DRIVE

CITY-ST-ZIP MCLEAN, VA 22107-0940

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Christopher W. Babbitt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/8/02

703-854-6000

Date

Daytime Phone #

CR2E003 (9/01)