## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000004178

**Entity Name: LIN TELEVISION CORPORATION** 

FILED May 04, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4 RICHMOND SQUARE, SUITE 200 ONE WEST EXCHANGE STREET PROVIDENCE, RI 02906

SUITE 5A

PROVIDENCE, RI 02903

**Current Mailing Address: New Mailing Address:** 

4 RICHMOND SQUARE, SUITE 200 ONE WEST EXCHANGE STREET

PROVIDENCE, RI 02906 SUITE 5A

PROVIDENCE, RI 02903

FEI Number: 13-3581627 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: **PCFO** 

Name: SADUSKY, VINCENT L

ONE WEST EXCHANGE STREET, SUITE 5A Address:

City-St-Zip: PROVIDENCE, RI 02903

Title: **EXVP** 

BLUMENTHAL, SCOTT M Name: ONE WEST EXCHANGE STREET Address: PROVIDENCE, RI 02903 City-St-Zip:

Title: VP/D

PARENT, DENISE M Name:

ONE WEST EXCHANGE STREET, SUITE 5A Address:

City-St-Zip: PROVIDENCE, RI 02903

Title: AS

MANNING, LISA Name:

Address: ONE WEST EXCHANGE STREET, SUITE 5A

City-St-Zip: PROVIDENCE, RI 02903

Title:

Name: SADUSKY, VINCENT L

ONE WEST EXCHANGE STREET, SUITE 5A Address:

City-St-Zip: PROVIDENCE, RI 02903

Title:

Name: SCHMAELING, RICHARD

ONE WEST EXCHANGE STREET, SUITE 5A Address:

City-St-Zip: PROVIDENCE, RI 02903

I hereby 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 all other like empowered.

SIGNATURE: LISA MANNING AS 05/04/2010