

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004178

FILED  
Apr 18, 2011  
Secretary of State

Entity Name: LIN TELEVISION CORPORATION

**Current Principal Place of Business:**

ONE WEST EXCHANGE STREET  
SUITE 5A  
PROVIDENCE, RI 02903

**New Principal Place of Business:**

**Current Mailing Address:**

ONE WEST EXCHANGE STREET  
SUITE 5A  
PROVIDENCE, RI 02903

**New Mailing Address:**

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

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: SADUSKY, VINCENT L  
Address: ONE WEST EXCHANGE STREET, SUITE 5A  
City-St-Zip: PROVIDENCE, RI 02903

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

Title: VP/D  
Name: PARENT, DENISE M  
Address: ONE WEST EXCHANGE STREET, SUITE 5A  
City-St-Zip: PROVIDENCE, RI 02903

Title: AS  
Name: MANNING, LISA  
Address: ONE WEST EXCHANGE STREET, SUITE 5A  
City-St-Zip: PROVIDENCE, RI 02903

Title: D  
Name: SADUSKY, VINCENT L  
Address: ONE WEST EXCHANGE STREET, SUITE 5A  
City-St-Zip: PROVIDENCE, RI 02903

Title: D  
Name: SCHMAELING, RICHARD  
Address: ONE WEST EXCHANGE STREET, SUITE 5A  
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

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date