

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90294 050 ***150.00

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1. Entity Name
THE NEWSPAPER NETWORK, INC.

Principal Place of Business
**2100 Q STREET
SACRAMENTO CA 95816**

Mailing Address
**2100 Q STREET
SACRAMENTO CA 95816**

11010006



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **68-0307849**

Applied For
Not Applicable

CHECK HERE IF MAKING CHANGES

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D <input type="checkbox"/> Delete
NAME	PRUITT, GARY
STREET ADDRESS	MCCLATCHY NEWSPAPERS, INC., 2100 Q STREET
CITY-ST-ZIP	SACRAMENTO CA
TITLE	P <input type="checkbox"/> Delete
NAME	TRUAX, ALAN
STREET ADDRESS	3480 ROSIN CT. STE 100
CITY-ST-ZIP	SACRAMENTO CA 95834
TITLE	S <input type="checkbox"/> Delete
NAME	KAROLE MORGAN-PRAGER
STREET ADDRESS	2100 Q STREET
CITY-ST-ZIP	SACRAMENTO CA
TITLE	T <input checked="" type="checkbox"/> Delete
NAME	TALAMANTES, PATRICK J
STREET ADDRESS	MCCLATCHY NEWSPAPERS, INC., 2100 Q STREET
CITY-ST-ZIP	SACRAMENTO CA 95816
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	T R. Elaine Lintecum
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V Patrick J. Talamantes
STREET ADDRESS	2100 Q Street
CITY-ST-ZIP	Sacramento, CA 95816
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V Robert J. Weil
STREET ADDRESS	2100 Q Street
CITY-ST-ZIP	Sacramento, CA 95816

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karole Morgan-Prager Karole Morgan-Prager, Secretary 4/22/03 916-321-1828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)