

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000339

FILED
Apr 07, 2009
Secretary of State

Entity Name: NEWSPAPERS FIRST INC.

Current Principal Place of Business:

330 MADISON AVE
11TH FL
NEW YORK, NY 10017

New Principal Place of Business:

Current Mailing Address:

330 MADISON AVE
11TH FL
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 13-3369304 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST.
SUITE 105
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZITZ, JAY T
Address: 330 MADISON AVE
City-St-Zip: NEW YORK, NY 10017

Title: ST () Delete
Name: TERMOTTO, ROBERT
Address: 330 MADISON AVE
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: ARMSTRONG, JOHN
Address: 330 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: BERNARD, STEVEN
Address: 330 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: BRANDT, STEVEN
Address: 330 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: BUCHANAN, MARGARET
Address: 330 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT TERMOTTO

EVP

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date