2001 UNIFORM BUSINESS REPORT (UBR)

Apr 28, 2001 8:00 am Secretary of State DOCUMENT # **F95000000969** COX NEWSPAPERS, INC. 04-28-2001 90079 010 ***150.00 Principal Place of Business Mailing Address 1400 LAKE HEARN DR 1400 LAKE HEARN DR ATLANTA GA 30319 ATLANTA GA 30319 CAGARAAA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 58-2069813 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City Zio 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIFLE ☐ Delete TITLE Change Addition DΡ NAME NAME SMITH, JAY R STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE, NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30319 TITLE Delete TITLE Change ☐ Addition D۷ NAME NAME COOPER, BRIAN G STREET ADDRESS STREET ADDRESS 1 400 LAKE HEARN DR CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30319 ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME MERDEK, ANDREW A STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE, NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30319 ☐ Delete TITLE Change TITLE Addition MAME NAME BARNETT, PRESTON B STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE, NE CITY-ST-ZIP CITY-ST-7IP ATLANTA GA 30319 TITLE ☐ Delete TITLE Change ☐ Addition ٧D NAME NAME SOLOMON, CHARLES B STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DRIVE, NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30319. UP TITLE ☐ Delete TITLE Change Addition NAME NAME EISNER, DEAN H STREET ADDRESS STREET ADDRESS 1400 LAKE HEARN DR., NE CITY-ST-ZIP ATLANTA GA 30319 13. 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 11 or Block 12 if changed, or on an attachment with an addrass, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/01

404-843-5000

Daytime Phone #