FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

Lynda Hauswirth

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

SIGNATURE:

## Apr 03, 2001 8:00 am Secretary of State DOCUMENT # F9500003827 1. Entity Name KR NET VENTURES, INC. 04-03-2001 90029 025 \*\*\*158.75 Principal Place of Business Mailing Address KNIGH RIDDER TAX % knight-ridder. Inc. 50 W SAN FERNANDO ST 50 W SAN FERNANDO ST. STE 1500 SAN JOSE CA 95113 SAN JOSE CA 95113 2. Principal Place of Business 3. Mailing Address KNIGHT KIDDER TAX Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0644743 Not Applicable Zip Country Zip 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 Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Change Addition CR2E034 (10/00) ☐ Delete TITLE RIDDER, P. ANTHONY NAME NAME 50 W SAN FERNANDO ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN JOSE CA 95113 TITLE ☐ Change Addition Delete TITLE Steven Ross 1 CHAPMAN, ALVAH H JR. NAME NAME SOW, SAN FERNANDO SAN JOSE, CA 95113 % KNIGHT-RIDDER, INC., ONE HERALD PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33132 TITLE TITLE ☐ Change ☐ Addition ☐ Delete CONNERS: MARY J -----NAME NAME STREET ADDRESS STREET ADDRESS 50 W SAN FERNANDO ST CITY-ST-ZIF CITY-ST-ZIP SAN JOSE CA 95113 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCCOMAS, FRANK NAME NAME STREET ADDRESS 50 W SAN FERNANDO ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN JOSE CA 95113 PD Delete TITLE TITLE Change Addition ALON G. Silverglat 50 W. SAN Fernando St. JONES, ROSS NAME NAME STREET ADDRESS STREET ADDRESS 50 W SAN FERNANDO ST CITY-ST-ZIP CITY-ST-ZIP SAN JOSE CA 95113 5AN JOSE, CA-95113 AVP TITLE ☐ Delete TITLE Change ☐ Addition NAME HAVSWIRTH, LYNDA Hauswirth NAME STREET ADDRESS 50 W SAN FERNANDO ST STREET ADDRESS CITY-ST-ZIP SAN JOSC SAN JOSE CA 95113 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 address, with all other like empoyered.

3/22/2001

Daytime Phone #