

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003827

Entity Name: KR NET VENTURES, INC.

FILED  
Feb 16, 2005  
Secretary of State

## Current Principal Place of Business:

50 W. SAN FERNANDO ST.  
1500  
SAN JOSE, CA 95113

## New Principal Place of Business:

## Current Mailing Address:

KNIGHT RIDDER TAX DEPT  
50 W SAN FERNANDO ST, STE 1200  
SAN JOSE, CA 95113

## New Mailing Address:

FEI Number: 65-0644743      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D ( ) Delete  
Name: RIDDER, P. ANTHONY  
Address: 50 W SAN FERNANDO ST SUITE 1500  
City-St-Zip: SAN JOSE, CA 95113

Title: D ( ) Delete  
Name: ROSSI, STEVEN B  
Address: 50 W. SAN FERNANDO ST SUITE 1500  
City-St-Zip: SAN JOSE, CA 95113

Title: D ( ) Delete  
Name: CONNORS, MARY JEAN  
Address: 50 W SAN FERNANDO ST SUITE 1500  
City-St-Zip: SAN JOSE, CA 95113

Title: D ( ) Delete  
Name: CEPPOS, JEROME  
Address: 50 W SAN FERNANDO ST SUITE 1500  
City-St-Zip: SAN JOSE, CA 95113

Title: P ( ) Delete  
Name: EFFREN, GARY R  
Address: 50 W SAN FERNANDO ST SUITE 1500  
City-St-Zip: SAN JOSE, CA 95113

Title: AV ( ) Delete  
Name: HAUSWIRTH, LYNDIA  
Address: 50 W SAN FERNANDO ST SUITE 1500  
City-St-Zip: SAN JOSE, CA 95113

## 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  
Name:  
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 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 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: LYNDIA HAUSWIRTH

AV

02/16/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date