2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

FILED Aug 26, 2005 08:00 AM Secretary of State DOCUMENT # F95000004874 1. Entity Name NEWHOUSE BROADCASTING CORPORATION Principal Place of Business Mailing Address 5000 CAMPUSWOOD DRIVE E. SYRACUSE NY 13057 US 5000 CAMPUSWOOD DRIVE E. SYRACUSE NY 13057 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc 2nd MOORE CR2E034 (5/05) City & State City & State 4. FEI Number Applied For 15-0523195 Not Applicable Zip Country Ζip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FI 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) S.607, 193(2)(b), F.S., allows for the waiver of the \$400.00 FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 7, 2005 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees did not receive prior notice. Fee to file is \$150.00. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Delete ULE THE NAME NEWHOUSE, DONALD E 08/26705-60001-020 550.00 NEWARK LEDGER/STAR LEDGER PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP NEWARK NJ 07101 VDT ☐ Delete TITLE ☐ Change ☐ Addition HILL MIRON, ROBERT J NAME NAME 5000 CAMPUSWOOD DRIVE STREET ADDRESS STREET AGORESS E. SYRACUSE NY 13057 CITY-ST-ZIP CHY-SI-ZIP ☐ Change ☐ Addition ☐ Delete Tritle HHE NEWHOUSE, SAMUEL I III NAME STREET ADDRESS STREET ADDRESS 30 JOURNAL SQUARE CITY-ST-ZIP CITY-ST-ZIP JERSEY CITY NJ 07306 Change Delete TillE ☐ Addition HILL NEWHOUSE, SIJR NAME NAM FOUR TIMES SQ. STREET ADDRESS STREET ADDRESS NEW YORK NY 10036 CITY-ST-ZIP CITY-ST-ZIP THEE Delete HILE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TritE NAME MAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City ST-7/P 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 of the corporation or the receiver or trustee empowered changed, or on an attachment with an ordress, with all c all othe

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