2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000001157

Title:

Name:

Address:

City-St-Zip:

Entity Name: SENTINEL COMMUNICATIONS NEWS VENTURES, INC.

FILED Mar 31, 2003 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 633 NORTH ORANGE AVENUE ORLANDO, FL 328011349 **Current Mailing Address: New Mailing Address:** 435 N MICHIGAN **STE 600** CHICAGO, IL 60611 FEI Number: 36-4132027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORTATION SERVICE SCO 1201 HAYS ST TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WALTZ, KATHLEEN P Name: Name: 633 NORTH ORANGE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: HAILE JR. L J Name: FRANKLIN, TIMOTHY 633 NORTH ORANGE AVENUE 633 NORTH ORANGE AVENUE Address: Address: ORLANDO, FL ORLANDO, FL 32801 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition SD () Delete SD KENNEY, CRANE KENNEY, CRANE H Name: Name: 633 NORTH ORANGE AVENUE 435 N. MICHIGAN AVENUE Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 60611

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.

Title:

Name:

Address:

City-St-Zip:

AS

HIANIK, MARK W

CHICAGO, IL 60611

435 N. MICHIGAN AVENUE

(X) Change () Addition

SIGNATURE: CRANE H. KENNEY SECR 03/31/2003

() Delete

HIANIK, MARK W

435 N. MICHIGAN AVE.

CHICAGO, IL 60611