

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002807

FILED
Jan 12, 2009
Secretary of State

Entity Name: TIME INC. DELAWARE

Current Principal Place of Business:

1271 AVENUE OF THE AMERICAS
TIME & LIFE BUILDING
NEW YORK, NY 10020

New Principal Place of Business:

Current Mailing Address:

1271 AVENUE OF THE AMERICAS
LEGAL DEPARTMENT
NEW YORK, NY 10020

New Mailing Address:

1271 AVENUE OF THE AMERICAS
TIME & LIFE BUILDING
NEW YORK, NY 10020

FEI Number: 13-3486363

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: DCEO () Delete
Name: MOORE, ANNE S
Address: 1271 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020

Title: DEIC () Delete
Name: HUEY, JOHN W JR.
Address: 1271 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020

Title: D () Delete
Name: BEWKES, JEFFREY
Address: ONE TIME WARNER CENTER
City-St-Zip: NEW YORK, NY 10019

Title: EVP () Delete
Name: AUTON, SYLVIA J
Address: 1271 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020

Title: VP () Delete
Name: PELLEGRINO, LINDA A
Address: 1271 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020

Title: VPP () Delete
Name: ADAMS, TIM
Address: ONE NORTH DALE MABRY
City-St-Zip: TAMPA, FL 33612

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
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City-St-Zip:

Title: () Change () Addition
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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 exemption stated in Chapter 119, 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: LINDA A. PELLEGRINO

VP

01/12/2009

Electronic Signature of Signing Officer or Director

_____ Date