

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005656

FILED  
Apr 29, 2011  
Secretary of State

Entity Name: NEXSTAR FINANCIAL CORPORATION

**Current Principal Place of Business:**

19 RESEARCH PARK CT  
SAINT CHARLES, MO 63304

**New Principal Place of Business:**

**Current Mailing Address:**

401 N TRYON ST  
NC1-021-02-20  
CHARLOTTE, NC 28255

**New Mailing Address:**

FEI Number: 22-3654383

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

**OFFICERS AND DIRECTORS:**

Title: D/P  
Name: KANAGA, MARK K  
Address: 401 N TRYON ST; NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

Title: SVP  
Name: DESOUZA, DONNA  
Address: 401 N TRYON ST; NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

Title: SEC  
Name: COSTAMAGNA, CHRISTINE M  
Address: 401 N TRYON ST; NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

Title: TREA  
Name: KAISER, CATHERINE A  
Address: 401 N TRYON ST; NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

I hereby 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 all other like empowered.

SIGNATURE: DONNA DESOUZA

SVP

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date