

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001788

FILED
Feb 23, 2009
Secretary of State

Entity Name: NORTHEAST FLORIDA NEWSPAPERS, LLC

Current Principal Place of Business:

297 PRINCE AVE., SUITE 14
ATHENS, GA 30601 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 792
ATHENS, GA 30603 US

New Mailing Address:

FEI Number: 57-1051408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, THOMAS H
1114 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WOOD, THOMAS H
Address: 1114 BEACH BOULEVARD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGR () Delete
Name: NESMITH, W.H. JR.
Address: 297 PRINCE AVE., SUITE 14
City-St-Zip: ATHENS, GA 30601 US

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS H. WOOD

MGR

02/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date