2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAM

DOCUMENT # NO9532 Apr 05, 2001 8:00 am Secretary of State 1. Entity Name KNIGHT RIDDER, INC. FUND 04-05-2001 90016 022 ****70 00 Mailing Address Price of Business dder Tax 50 W. San Fernando St. ·C/O Knight Ridder Tax San Jose, CA 95113 50 W. San Fernando St. AU042979 San Jose, CA 95113 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2610440 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent _CT .Cor.poration ~~. Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road Plantation, FL 33324 Zip Code City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to. FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition PD TITLE ☐ Delete TITLE NAME Ridder, Anthony P. NAME STREET ADDRESS STREET ADDRESS 50 West San Fernando St. CITY-ST-ZIP CITY-ST-ZIP San Jose, CA 95113 ☐ Change ☐ Addition ☐ Delete TITLE TITLE AVP NAME NAME Hauswirth, Lynda STREET ADDRESS STREET ADDRESS 50 W. San Fernando St. CITY-ST-ZIP CITY-ST-ZIP San Jose, CA 95113 ☐ Addition TITLE ☐ Change ☐ Delete S NAME Laffoon, Polk STREET ADDRESS STREET ADDRESS 50 West San Fernando St. CITY-ST-ZIP CITY-ST-ZIP San Jose, CA 95113 Addition ☐ Delete TITLE Change TITLE NAME NAME Silverglat, Alan STREET ADDRESS STREET ADDRESS 50 West San Fernando St. CITY-ST-ZIP CITY-ST-ZIP <u>San Jose, CA 95113</u> ☐ Delete TITLE Change Addition TITLE D NAME NAME Ceppos, Jerome STREET ADDRESS STREET ADDRESS 50 West San Fernando St. CITY-ST-ZIP CITY-ST-ZIP San Jose, CA 95113 ☐ Change Addition ☐ Delete TITLE TITLE NAME Connors, Mary Jean STREET ADDRESS STREET ADDRESS 50 West San Fernando St. CITY-ST-7IP CITY-ST-ZIP San Jose, CA 95113 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered. 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 3/22/2001 SIGNATURE: Lynda Hauswirth SIGNING OFFICER OR DIRECTOR

Daytime Phone #