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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N22486

1. Corporation Name
SYSTEM/55 USERS GROUP, INC.

• 990887 - 90053 - 457 •

Principal Place of Business	Mailing Address
MIAMI HERALD ONE HERALD PLACE MIAMI FL 33132 US	2655 PINETREE DR MIAMI BEACH FL 33140 US

2. Principal Place of Business	2a. Mailing Address
21 Tampa Tribune	26
Suite, Apt. #, etc. 22 202 S. Parker Street	Suite, Apt. #, etc. 27 1604 Cobbler Dr.
City & State 23 Tampa FL	City & State 28 Lutz, FL
Zip 24 33606 Country 25 US	Zip 29 33549 Country 30 US

3. Date Incorporated or Qualified: 09/15/1987

4. FEI Number: 59-2844102 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

WILHELM, DENNIS W
2655 PINE TREE DR
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Name: Kim Pollard (Pollard)
82 Street Address (P.O. Box Number is Not Acceptable): 1604 Cobbler Drive
83
84 City: Lutz, FL 85 Zip Code: 33549

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE [signature] 3/12/99
Signature, (type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BRASWELL, JAMIE 750 RIDDER PARK DR SAN JOSE CA	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD BRASWELL, JAMES ONE HERALD PLAZA MIAMI FL 33132	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KINERK, MICHAEL D 1 HERALD PLAZA MIAMI FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KIM POLLARD. TAMPA TRIBUNE P. O. BOX 191 TAMPA FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD COHEE, DIANE L WASHINGTON POST, 1150 15TH N.W. WASHINGTON DC	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FAULKNER, FRED LAW BULLETIN 415 N STATE ST CHICAGO IL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	VPD FAULKNER, FRED Law Bulletin, 415 N STATE ST Chicago IL 60610	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D BYERS, JESSE Tulsa World, Tulsa, Oklahoma	☐ Change ☒ Addition

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] SIGNATURE REQUIRED JAMES BRASWELL 1-7-99 305-376-3671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #