

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90219 012 ***150.00

DOCUMENT # P04816

1. Entity Name
GANNETT CO., INC.



Principal Place of Business
**10315 USA TODAY WAY
MIRAMAR, FL 33025 US**

Mailing Address
**7950 JONES BRANCH DR
MCLEAN, VA 22107**

34061584



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

16-0442930

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☐ Delete
NAME MILLER, LARRY F
STREET ADDRESS 7950 JONES BRANCH DR
CITY-ST-ZIP MCLEAN, VA 22107

TITLE VP/S ☒ Change ☐ Addition
NAME Todd A. Mayman
STREET ADDRESS
CITY-ST-ZIP

TITLE SVPS ☐ Delete
NAME CHAPPLE, THOMAS L
STREET ADDRESS 7950 JONES BRANCH DR
CITY-ST-ZIP MCLEAN, VA 22107

TITLE SVP ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VT ☐ Delete
NAME MARTORE, GRACIA C
STREET ADDRESS 7950 JONES BRANCH DR
CITY-ST-ZIP MCLEAN, VA 22107

TITLE SVP ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME BLADWIN, CHRISTOPHER W
STREET ADDRESS 7950 JONES BRANCH DR
CITY-ST-ZIP MCLEAN, VA 22107

TITLE ☒ Change ☐ Addition
NAME Baldwin, Christopher W.
STREET ADDRESS
CITY-ST-ZIP

TITLE VCPD ☐ Delete
NAME MCCORKINDALE, DOUGLAS H
STREET ADDRESS 7950 JONES BRANCH DR
CITY-ST-ZIP MCLEAN, VA 22107

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Todd Mayman

Todd Mayman

4/22/04

(703) 854-6000