

# FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PM 2:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P26947**

**(2)**

1. Corporation Name

**THOMSON NEWSPAPERS HOLDINGS INC.**

Principal Place of Business

3150 DES PLAINES AVE.  
DES PLAINES IL 60018

Mailing Address

3150 DES PLAINES AVE.  
DES PLAINES IL 60018

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                              |                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 3. Date Incorporated or Qualified<br><b>11/16/1989</b>                                                                                                       | 3a. Date of Last Report<br><b>05/01/1994</b>           |
| 4. FEI Number<br><b>36-3514066</b>                                                                                                                           | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired<br><input type="checkbox"/>                                                                                                 | <b>\$8.75</b> Additional Fee Required                  |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                           | <b>\$5.00</b> May Be Added to Fees                     |
| 8. This corporation has liability for intangible tax under Ch. 199.002, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                                        |

|                                |                        |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address    |
| 21 Suite, Apt. #, etc.         | 26 Suite, Apt. #, etc. |
| 22 City & State                | 27 City & State        |
| 23 Zip                         | 28 Zip                 |
| 24 Country                     | 29 Country             |
| 25                             | 30                     |

|                                                                                                                                |                                                       |
|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| 9. Name and Address of Current Registered Agent                                                                                | 10. Name and Address of New Registered Agent          |
| <b>THE PRENTICE-HALL CORPORATION SYSTEM INC.</b><br><b>1201 HAYS STREET</b><br><b>SUITE 105</b><br><b>TALLAHASSEE FL 32301</b> | 81 Name                                               |
|                                                                                                                                | 82 Street Address (P.O. Box Number is Not Acceptable) |
|                                                                                                                                | 83                                                    |
|                                                                                                                                | 84 City                                               |
|                                                                                                                                | 85 Zip Code                                           |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature of agent or printed name of registered agent and title if applicable) (Printed Name of Agent Signature Required when Registered)

| 12. OFFICERS AND DIRECTORS |                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                                                       |
|----------------------------|----------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| TITLE                      | CD                   | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                     |
| NAME                       | THOMSON, KENNETH R.  | 1.2 NAME                                              |                                                                                                       |
| STREET ADDRESS             | 65 QUEEN STREET WEST | 1.3 STREET ADDRESS                                    |                                                                                                       |
| CITY, ST, ZIP              | TORONTO, ONT., CAN.  | 1.4 CITY, ST, ZIP                                     |                                                                                                       |
| TITLE                      | PD                   | 2.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                          |
| NAME                       | BROWN, MICHAEL       | 2.2 NAME                                              | Richard D. Harrington                                                                                 |
| STREET ADDRESS             | 1 STATION PLACE      | 2.3 STREET ADDRESS                                    |                                                                                                       |
| CITY, ST, ZIP              | STAMFORD CT          | 2.4 CITY, ST, ZIP                                     |                                                                                                       |
| TITLE                      | VD                   | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                     |
| NAME                       | DALEO, R D           | 3.2 NAME                                              |                                                                                                       |
| STREET ADDRESS             | 1 STATION PL         | 3.3 STREET ADDRESS                                    |                                                                                                       |
| CITY, ST, ZIP              | STAMFORD CT          | 3.4 CITY, ST, ZIP                                     |                                                                                                       |
| TITLE                      | VP                   | 4.1 TITLE                                             | Vice President/Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | SMITH, JERRY B       | 4.2 NAME                                              | Michael S. Harris                                                                                     |
| STREET ADDRESS             | 600 N WESTSHORE BLVD | 4.3 STREET ADDRESS                                    | 1 Station Place                                                                                       |
| CITY, ST, ZIP              | TAMPA FL             | 4.4 CITY, ST, ZIP                                     | Stamford, CT                                                                                          |
| TITLE                      | V                    | 5.1 TITLE                                             | Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition           |
| NAME                       | WEEKS, PAUL E.       | 5.2 NAME                                              | Paul B. Martin                                                                                        |
| STREET ADDRESS             | 65 QUEEN STREET WEST | 5.3 STREET ADDRESS                                    | 3150 Des Plaines Avenue                                                                               |
| CITY, ST, ZIP              | TORONTO, ONT., CAN.  | 5.4 CITY, ST, ZIP                                     | Des Plaines, Illinois 60018                                                                           |
| TITLE                      | VP                   | 6.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                          |
| NAME                       | HOLLON, JAY S        | 6.2 NAME                                              | Carl Tobiasen                                                                                         |
| STREET ADDRESS             | 345 ROUSER RD        | 6.3 STREET ADDRESS                                    |                                                                                                       |
| CITY, ST, ZIP              | CORAOPOLIS PA        | 6.4 CITY, ST, ZIP                                     |                                                                                                       |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(B), Florida Statutes. I further certify that the information included 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: Paul B. Martin 4-20-95 (708) 391-9237  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P26947

THOMSON NEWSPAPERS HOLDINGS INC.

DIRECTORS &  
OFFICERS

NAME AND ADDRESS

TERM EXPIRES

Director -  
President & CEO

Richard J. Harrington  
1 Station Place  
Stamford, Ct. 06902

Next Annual  
Meeting

Senior V.P. -  
Technology

G. B. Flake  
1 Station Place  
Stamford, Ct. 06902

Next Annual  
Meeting

Director -  
Sr. V.P. & Director  
Human Resources

B. Marraffa  
1 Station Place  
Stamford, Ct. 06902

Next Annual  
Meeting

Group President -  
Senior V.P.

R. Michael Sheppard  
3150 Des Plaines Ave.  
Des Plaines, IL 60018

Next Annual  
Meeting

Group President -  
Senior V.P.

F. Steve Sumner  
600 N. Westshore Blvd.  
Tampa, Florida 33609

Next Annual  
Meeting

Group President -  
Senior V.P.

Robert J. Hively  
345 Rouser Road  
Coraopolis, PA 15108

Next Annual  
Meeting

Director  
Sr. V.P. & CFO

R. D. Daleo  
1 Station Place  
Stamford, Ct. 06902

Next Annual  
Meeting

Director -  
Asst. Secretary

Michael R. Doody  
65 Queen Street West  
Toronto, Ontario Canada

Next Annual  
Meeting

Vice President-  
Production Systems

Paul B. Martin  
3150 Des Plaines Ave.  
Des Plaines, IL 60018

Next Annual  
Meeting

Vice President-  
Secretary

Michael S. Harris  
1 Station Place  
Stamford, CT 06902

Next Annual  
Meeting

Vice President-  
Procurement

Claude H. Blanc  
1 Station Place  
Stamford, CT. 06902

Next Annual  
Meeting

Vice-President &  
Corp. Controller

Eric Shuman  
1 Station Place  
Stamford, CT. 06902

Next Annual  
Meeting