

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000003084

FILED
Jun 17, 2009
Secretary of State

Entity Name: MCCLATCHY SHARED SERVICES, INC.

Current Principal Place of Business:

ONE HERALD PLAZA
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

C/O THE MCCLATCHY COMPANY, CORPORATE LEGAL
2100 Q STREET
SACRAMENTO, CA 95816 US

New Mailing Address:

FEI Number: 65-0651121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PRUITT, GARY
Address: 2100 Q STREET
City-St-Zip: SACRAMENTO, CA 95816

Title: DVP () Delete
Name: TALAMANTES, PATRICK
Address: 2100 Q STREET
City-St-Zip: SACRAMENTO, CA 95816

Title: PRES () Delete
Name: DOWIS, DAN
Address: ONE HERALD PLAZA
City-St-Zip: MIAMI, FL 33132

Title: SEC () Delete
Name: MORGAN-PRAGER, KAROLE
Address: 2100 Q STREET
City-St-Zip: SACRAMENTO, CA 95816

Title: TREA () Delete
Name: LINTECUM, ELAINE
Address: 2100 Q STREET
City-St-Zip: SACRAMENTO, CA 95816

Title: ASAT () Delete
Name: TALAMANTES, PATRICK
Address: 2100 Q STREET
City-St-Zip: SACRAMENTO, CA 95816

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: PRUITT, GARY
Address: 2100 Q STREET
City-St-Zip: SACRAMENTO, CA 95816

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAROLE MORGAN-PRAGER

SEC

06/17/2009

Electronic Signature of Signing Officer or Director

_____ Date