

1.) CORPORATION NAME:

**LIN Television Corporation**

DUE DATE: **12/30/2010**

SCC ID NO: **F1278789**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE WEST EXCHANGE STREET  
SUITE 5A

CITY/ST/ZIP: PROVIDENCE, RI 02903-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: VINCENT L SADUSKY  
TITLE: P/CEO  
ADDRESS: ONE WEST EXCHANGE STREET  
SUITE 5A  
CITY/ST/ZIP/CO: PROVIDENCE, RI 02903-

OFFICER

DIRECTOR

NAME: DENISE M PARENT  
TITLE: VP/GC/S  
ADDRESS: ONE WEST EXCHANGE STREET  
SUITE 5A  
CITY/ST/ZIP/CO: PROVIDENCE, RI 02903-

OFFICER

DIRECTOR

NAME: SCOTT M BLUMENTHAL  
TITLE: EXEC VP  
ADDRESS: ONE WEST EXCHANGE STREET  
SUITE 5A  
CITY/ST/ZIP/CO: PROVIDENCE, RI 02903-

OFFICER

DIRECTOR

NAME: LISA A MANNING  
TITLE: ASST SEC  
ADDRESS: ONE WEST EXCHANGE STREET  
SUITE 5A  
CITY/ST/ZIP/CO: PROVIDENCE, RI 02903-

OFFICER

DIRECTOR

|  |   |   |  |
|--|---|---|--|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | RICHARD J. SCHMAELING<br>SVP/CFO<br>ONE WEST EXCHANGE STREET<br>SUITE 5A<br>PROVIDENCE, RI 02903- | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
|--|---|---|--|

|  |  |   |                                   |
|--|--|---|-----------------------------------|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | DOUG DAVIS<br>VICE PRESIDENT<br>300 WAVY STREET<br>PORTSMOUTH, VA 23704- | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
|--|--|---|-----------------------------------|

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |                  |
|---|----------------------------------|------------------|
| <u>/s/ LISA A MANNING</u>                           | <u>LISA A MANNING, ASST SEC</u>  | <u>12/9/2010</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE             |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.