

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857934

Entity Name: MEREDITH CORPORATION**Current Principal Place of Business:**1716 LOCUST STREET
DES MOINES, IA 50309-3023**Current Mailing Address:**1716 LOCUST STREET
DES MOINES, IA 50309-3023 US**FEI Number:** 42-0410230**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :****Title** PRESIDENT, NATIONAL MEDIA
GROUP**Name** HARTY, THOMAS H**Address** 1716 LOCUST STREET**City-State-Zip:** DES MOINES IA 50309**Title** VICE PRESIDENT AND CHIEF
FINANCIAL OFFICER**Name** CERYANEC, JOSEPH H**Address** 1716 LOCUST ST**City-State-Zip:** DES MOINES IA 50309**Title** CHIEF DEVELOPMENT OFFICER,
GENERAL COUNSEL & SECRETARY**Name** ZIESER, JOHN S**Address** 1716 LOCUST STREET**City-State-Zip:** DES MOINES IA 50309**Title** CHAIRMAN, PRESIDENT AND CEO**Name** LACY, STEPHEN M**Address** 1716 LOCUST ST**City-State-Zip:** DES MOINES IA 50309**Title** CORPORATE CONTROLLER**Name** CAPPAERT, STEVEN M**Address** 1716 LORUST ST**City-State-Zip:** DES MOINES IA 50309**Title** PRESIDENT, LOCAL MEDIA GROUP**Name** KARPOWICZ, PAUL A**Address** 1716 LOCUST ST.**City-State-Zip:** DES MOINES IA 50309

I hereby 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 all other like empowered.

SIGNATURE: JOHN S. ZIESER**CHIEF DEVELOPMENT
OFFICER, GENERAL
COUNSEL & SECRETARY****05/01/2013**

Electronic Signature of Signing Officer/Director Detail

Date