

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000000044

**Entity Name:** HEARST PROPERTIES INC.

**Current Principal Place of Business:**

300 WEST 57TH STREET  
NEW YORK, NY 10019

**Current Mailing Address:**

300 WEST 57TH STREET  
NEW YORK, NY 10019

**FEI Number:** 43-1016745

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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, DIRECTOR  
Name            WERTLIEB, JORDAN  
Address        300 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title            SENIOR VICE PRESIDENT,  
TREASURER, DIRECTOR, CFO  
Name            DRAIN, JOHN  
Address        300 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title            SECRETARY  
Name            BOSTRON, CATHERINE  
Address        300 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title            ASSISTANT SECRETARY  
Name            REDMAN, MARK  
Address        300 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title            ASSISTANT TREASURER  
Name            KORS, DAVID L.  
Address        3540 TORINGTON WAY  
City-State-Zip: CHARLOTTE NC 28277

Title            ASSISTANT TREASURER  
Name            MCDONALD, WARREN K  
Address        3540 TORINGTON WAY  
City-State-Zip: CHARLOTTE NC 28277

Title            VP  
Name            HERRIOTT, STANLEY  
Address        300 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

*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:** DAVID L. KORS

**ASSISTANT TREASURER    04/29/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date