

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000001536

Entity Name: GARDNER BUSINESS MEDIA, INC.**Current Principal Place of Business:**6915 VALLEY AVENUE
CINCINNATI, OH 45244-3029**Current Mailing Address:**6915 VALLEY AVENUE
CINCINNATI, OH 45244-3029**FEI Number: 31-0291590****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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
Name KLINE, RICHARD G SR.
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title SECRETARY
Name SKAVLEM, MELISSA KLINE
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title TREASURER
Name BRUBAKER, ERNEST C
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name PAPKE, BRIAN J
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name BRUBAKER, ERNEST C
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE, ROSEMARY
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE, MARTHA D
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name NAPPI, RALPH J
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

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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: ERNEST C. BRUBAKER**TREASURER****04/26/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MORRIS, LEE B
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name BEARD, THOMAS
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE, DONALD G
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE, STEVE R JR
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE, RICHARD G JR
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name HILL, COURTNEY J
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name MILLER, ALLISON L
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name LOUIS, PHILIP A
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE SKAVLEM, MELISSA
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029

Title DIRECTOR
Name KLINE, RICHARD G SR
Address 6915 VALLEY AVENUE
City-State-Zip: CINCINNATI OH 45244-3029