

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36951

Entity Name: LEXISNEXIS VITALCHEK NETWORK INC.

Current Principal Place of Business:

1000 ALDERMAN DRIVE,
ALPHARETTA, GA 30005

Current Mailing Address:

1105 NORTH MARKET ST
WILMINGTON, DE 19801 US

FEI Number: 62-1365614

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O 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 DP
Name KELSEY, MARK
Address 1000 ALDERMAN DRIVE,
City-State-Zip: ALPHARETTA GA 30005

Title DT
Name FOGARTY, KENNETH
Address 313 WASHINGTON ST
City-State-Zip: NEWTON MA 02458

Title D
Name THOMPSON, KENNETH
Address 9443 SPRINGBORO PIKE
City-State-Zip: MIAMISBURG OH 45342

Title DIRECTOR
Name GOLDWEITZ, JULIE
Address 230 PARK AVE
City-State-Zip: NEW YORK NY 10169

Title V, SECRETARY
Name SIMONTON, RENEE
Address 1105 NORTH MARKET ST
City-State-Zip: WILMINGTON DE 19801

Title VP
Name PETER DANGOIA
Address 313 WASHINGTON ST
City-State-Zip: NEWTON MA 02458

Title ASST. TREASURER
Name HORGAN, MARY ANN
Address 313 WASHINGTON ST
City-State-Zip: NEWTON MA 02458

Title VP
Name FROMMER, CREIGHTON
Address 1000 ALDERMAN
City-State-Zip: ALPHARETTA GA 30005

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: RENEE SIMONTON

VICE PRESIDENT

01/09/2020

Electronic Signature of Signing Officer/Director Detail

Date