

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16029

FILED
Apr 11, 2007
Secretary of State

Entity Name: ADVANSTAR COMMUNICATIONS INC.

Current Principal Place of Business:

131 W. FIRST STREET
DULUTH, MN 55802 US

New Principal Place of Business:

Current Mailing Address:

131 W. FIRST STREET
DULUTH, MN 55802 US

New Mailing Address:

FEI Number: 59-2757389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPT () Delete
Name: HARTWICK, ADELE D
Address: 131 WEST FIRST STREET
City-St-Zip: DULUTH, MN 55802 US

Title: D () Delete
Name: KWON, OHSANG
Address: 65 EAST 55TH STREET
City-St-Zip: NEW YORK, NY 10022 US

Title: VPS () Delete
Name: MONTGOMERY, DAVID W
Address: 131 WEST FIRST STREET
City-St-Zip: DULUTH, MN 55802 US

Title: VPD () Delete
Name: ALIC, JAMES M
Address: ONE PARK AVENUE
City-St-Zip: NEW YORK, NY 10016 US

Title: PCEO () Delete
Name: LOGGIA, JOE
Address: 6200 CANOGA AVENUE
City-St-Zip: WOODLAND HILLS, CA 91367 US

Title: VPAS () Delete
Name: LISMAN, ERIC
Address: DAMONMILL SQUARE, SUITE 6A
City-St-Zip: CONCORD, MA 01742 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPS (X) Change () Addition
Name: HEWINS, WARD
Address: DAMONMILL SQUARE, SUITE 6A
City-St-Zip: CONCORD, MA 01742 US

Title: VPD (X) Change () Addition
Name: ALIC, JAMES M
Address: 641 LEXINGTON AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ADELE D. HARTWICK

VPT

04/11/2007

Electronic Signature of Signing Officer or Director

Date