

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000007183

**Entity Name:** INFORMA BUSINESS MEDIA, INC.

**Current Principal Place of Business:**

1468 WEST NINTH STREET, STE 330, 3RD FLOOR  
CLEVELAND, OH 44113

**Current Mailing Address:**

301 N CATTLEMEN RD STE 301  
ATTN: INFORMA TAX DEPT  
SARASOTA, FL 34232 US

**FEI Number:** 48-1071277

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 DIRECTOR/PRESIDENT  
Name MARTELL, PATRICK  
Address 5 HOWICK PLACE  
City-State-Zip: LONDON SW1P 1WG

Title TREASURER, CFO  
Name DONAGHER, KEVIN T  
Address 200 5TH STE 1020  
City-State-Zip: WALTHAM MA 02451

Title ASSISTANT SECRETARY  
Name PETER, PATRICIA  
Address 605 3RD AVE  
21ST FLOOR  
City-State-Zip: NEW YORK NY 10158

Title DIRECTOR, VP & ASSISTANT SECRETARY  
Name SHAGHAF, SHEIKH  
Address 605 3RD AVENUE, 22ND FL.  
City-State-Zip: NEW YORK NY 10158

Title DIRECTOR/SECRETARY/ VICE PRESIDENT  
Name VASANDANI, BRIAN  
Address 605 3RD AVENUE, 22ND FL. 21ST FLOOR  
City-State-Zip: NEW YORK NY 10158

Title VICE PRESIDENT OF TAX  
Name MARC, LEVINE  
Address 301 N CATTLEMEN RD STE 301  
ATTN: INFORMA TAX DEPT  
City-State-Zip: SARASOTA FL 34232

Title TAX DIRECTOR  
Name PINZONE, KERI  
Address 1983 MARCUS AVENUE, STE. 250  
ATTN: TAX DEPT  
City-State-Zip: LAKE SUCCESS NY 11042

Title VP  
Name SMITH, JULIE  
Address 2644 30TH ST  
City-State-Zip: SANTA MONICA NY 10158

*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:** MARC LEVINE

**VP OF TAX**

**05/01/2024**

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

\_\_\_\_\_  
Date