## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000006673

Entity Name: JOHN WILEY & SONS, INC.

**Current Principal Place of Business:** 

111 RIVER STREET HOBOKEN. NJ 07030

**Current Mailing Address:** 

111 RIVER STREET HOBOKEN, NJ 07030 US

FEI Number: 13-5593032 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

FILED Mar 07, 2023

**Secretary of State** 

4390552595CC

## Officer/Director Detail:

Title	DIRECTOR	Title	PRESIDENT
Name	WILEY, JESSE C	Name	NAPACK, BRIAN A
Address	111 RIVER STREET	Address	111 RIVER STREET
City-State-Zip:	HOBOKEN NJ 07030	City-State-Zip:	HOBOKEN NJ 07030

Title **TREASURER** Title **SECRETARY** Name MONACO, KEVIN PIERRE-MERRITT, MAJORIE Name Address 111 RIVER STREET Address 111 RIVER ST HOBOKEN NJ 07030 City-State-Zip: City-State-Zip: HOBOKEN NJ 07030

Title VP Title DIRECTOR

NameLAMPHIER, JONNameBAKER, MARI JEANAddress111 RIVER STAddress111 RIVER STREETCity-State-Zip:HOBOKEN NJ 07030City-State-Zip:HOBOKEN NJ 07030

Title DIRECTOR Title DIRECTOR

Name BELL, GEORGE Name LESHIN, LAURIE

Address 111 RIVER STREET Address 111 RIVER STREET

City-State-Zip: HOBOKEN NJ 07030 City-State-Zip: HOBOKEN NJ 07030

Continues on page 2

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: GEORGE BELL DIRECTOR 03/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameMCDANIEL, RAYMOND W. JR.NameDOBSON, DAVID C.Address111 RIVER STREETAddress111 RIVER STREETCity-State-Zip:HOBOKEN NJ 07030City-State-Zip:HOBOKEN NJ 07030

Title DIRECTOR Title DIRECTOR

NameBIRNBAUM, BETH A.NamePESCE, WILLIAM J.Address111 RIVER STREETAddress111 RIVER STREETCity-State-Zip:HOBOKEN NJ 07030City-State-Zip:HOBOKEN NJ 07030

Title DIRECTOR Title DIRECTOR

NameSINGH, INDER M.NameHEMPHILL, BRIAN O.Address111 RIVER STREETAddress111 RIVER STREETCity-State-Zip:HOBOKEN NJ 07030City-State-Zip:HOBOKEN NJ 07030