

**Amendment to Annual Report**Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - <http://www.FilingInOregon.com> - Phone: (503) 986-2200

- ☐ Professional Corporation
☐ Nonprofit Corporation
☒ Business Corporation
☐ Cooperative
☐ Water District

FILED**MAR 08 2011**REGISTRY NUMBER: **323901-97****OREGON
SECRETARY OF STATE**ENTITY TYPE: ☐ DOMESTIC OR ☒ FOREIGN

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.
We must release this information to all parties upon request and it will be posted on our website.
Please Type or Print Legibly in Black Ink.

For office use only

1) NAME OF ENTITY: **INFORMA BUSINESS INFORMATION, INC.**

2) PRINCIPAL PLACE OF BUSINESS:

3) ADDRESS FOR MAILING NOTICES:

**101 ARTHUR ANDERSEN PKWY, STE. 100
SARASOTA, FL 34232**

4) THE REGISTERED AGENT HAS BEEN CHANGED TO:

5) THE NEW REGISTERED AGENT HAS CONSENTED TO THIS APPOINTMENT.

6) ADDRESS OF THE NEW REGISTERED OFFICE: (Must be an Oregon Street Address which is identical to the registered agent's business office.)

7) THE STREET ADDRESS OF THE NEW REGISTERED OFFICE AND THE BUSINESS ADDRESS OF THE REGISTERED AGENT ARE IDENTICAL.

8) NOTIFICATION:

☐ The entity has been notified in writing of this change.**OFFICERS NAME AND ADDRESSES**

9) PRESIDENT: (Name and Address)

NICK DEL RIO**52 VANDERBILT AVENUE, 7TH FL.****NEW YORK, NEW YORK 10017**

10) SECRETARY: (Name and Address)

THOMAS C. ETTER**17 STATE STREET, 32ND FL.****NEW YORK, NEW YORK 10004**

11) EXECUTION: (An officer must sign.)

By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature:

Printed Name:

Patricia Giardina

Title:

Assistant Secretary

Date:

March 1, 2011

CONTACT NAME: (To resolve questions with this filing.)

Patricia Giardina

PHONE NUMBER: (Include area code.)

917-332-2185**FEES**

No Processing Fee

Confirmation Copy (Optional) \$5

