| | State of Rhode | Island | | Fee: \$50.00 | | | | |
|--|--|--------------------------|--|-----------------|--|--|--|--|
| | Office of the Secreta | • |) | | | | | |
| | Division Of Busines 148 W. River S | | | | | | | |
| | Providence RI 029 | 04-2615 | | | | | | |
| 1636 | (401) 222-30 | 40 | | | | | | |
| Foreign Business Corpora | tion | | | | | | | |
| Annual Report Filing Period: February 1 - May | / 1 | | | | | | | |
| In accordance with R.I.G.L. 7-1 | 1.2-1501(e). each corporation | n failina or re | usina to | | | | | |
| file its annual report within thir | file its annual report within thirty (30) days after the time prescribed by law | | | | | | | |
| (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. | | | | | | | | |
| ANNUAL REPORT YEAR - EN | TER THE CURRENT YEAR 2 | 024 : <u>2024</u> | | | | | | |
| 1. Corporate ID No. <u>00000</u> | 51927 | | | | | | | |
| 2. Name of Corporation <u>A. C</u> | . NIELSEN COMPANY | | | | | | | |
| 3. Street Address Principal E | Susiness Office: | | | | | | | |
| No. and Street: <u>675 AVEN</u> | UE OF THE AMERICAS | | | | | | | |
| City or Town: <u>NEW YOR</u> | K | State: <u>NY</u> | Zip: <u>10010</u> Count | try: <u>USA</u> | | | | |
| 4. Business Phone No. | | | | | | | | |
| <u>(410) 717-7134</u> | | | | | | | | |
| 5. State of Incorporation | | | | | | | | |
| State: <u>DE</u> | | | | | | | | |
| | NAICS CODE | | | | | | | |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. | | | | | | | | |
| <u>541910</u> | | | | | | | | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island | | | | | | | | |
| RETAIL AND MEDIA MEASUREMENT | | | | | | | | |
| | RETAIL AND MEDIA MEASUREMENT 7. Names and Addresses of the Officers and Directors: | | | | | | | |
| All officers and directors must be listed. | | | | | | | | |
| All officers and directors f | HUST DE HSTEU. | | | | | | | |
| Title | Individual Name First, Middle, Last, Suffix | Address, Ci | Address ay or Town, State, Zip Code | , Country | | | | |
| 1 | | | | | | | | |

| PRESIDENT | GEORGE CALLARD | 675 AVENUE OF THE AMERICAS NEW YORK, NY 12210 USA | |
|-----------|--------------------|--|--|
| TREASURER | CAITLIN CAHALAN | 675 AVENUE OF THE AMERICAS NEW YORK, NY 10010 US | |
| SECRETARY | STEPHANIE MARCOZZI | 675 AVENUE OF THE AMERICAS NEW YORK, NY 10010 USA | |
| DIRECTOR | GEORGE CALLARD | 675 AVENUE OF THE AMERICAS NEW YORK, NY 10010 US | |
| DIRECTOR | STEPHANIE MARCOZZI | 675 AVENUE OF THE AMERICAS NEW YORK, NY 10010 US | |
| DIRECTOR | CAITLIN CAHALAN | 675 AVENUE OF THE AMERICAS NEW YORK, NY 10010 US | |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per | | Total Issued and |
|----------------|-----------------|----------------|------------------|---------------------|
| | Series of Stock | Share | Total Authorized | |
| | | | Shares | Num of |
| | | | Number of Shares | Shares |
| CWP | | \$500,000.0000 | 60.00 | 0 |
| CWP | | \$1.0000 | 1,000.00 | 0 |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 29 Day of April, 2024 at 4:39:25 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By STEPHANIE MARCOZZI

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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