

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003869

Entity Name: NIELSEN CATALINA VENTURES, LLC

Current Principal Place of Business:

200 CARILLON PARKWAY
ST. PETERSBURG, FL 33716

Current Mailing Address:

200 CARILLON PARKWAY
ST. PETERSBURG, FL 33716

FEI Number: 27-0692423

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title MGR
Name BEARD, RANDALL
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title MGR
Name CUMINALE, JIM
Address 200 CARILLON PARKWAY
City-State-Zip: ST PETERSBURG FL 33716

Title MGR
Name NAZZARO, MIKE
Address 200 CARILLON PARKWAY
City-State-Zip: ST PETERSBURG FL 33716

Title MGR
Name SECKAR, STEVE
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title MGR
Name WOITESHEK, EDWARD
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title MGR
Name CANTER, NEIL
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title ASSISTANT SECRETARY
Name LASSETER, ANNA
Address 200 CARILLON PARKWAY
City-State-Zip: ST PETERSBURG FL 33716

Title ASSISTANT TREASURER
Name FLANIGAN, JAMES
Address 200 CARILLON PARKWAY
City-State-Zip: ST PETERSBURG FL 33716

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNA LASSETER

ASSISTANT SECRETARY 01/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title SECRETARY
Name IYER, KARTHIK
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title CHEIF EXECUTIVE OFFICE
Name NAZZARO, MIKE
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title ASSISTANT SECRETARY
Name RUBENSTEIN, ERIC M
Address 200 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716