

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 821728

(3)

1. Corporation Name

A.C. NIELSEN COMPANY

Principal Place of Business

150 NORTH MARTINGALE ROAD  
SCHAUMBURG IL 60173-2076  
US

Mailing Address

150 N MARTINGALE RD  
ATTN: CORP SECRETARY  
SCHAUMBURG IL 60173-2408  
US



2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

3. Date Incorporated or Qualified

08/13/1968

3a. Date of Last Report

02/20/1996

4. FEI Number

36-1549320

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of the person who is the registered agent and is not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                              |                                            |
|----------------|------------------------------|--------------------------------------------|
| TITLE          | PD                           | <input type="checkbox"/> DELETE            |
| NAME           | LIEVENSE, ROBERT J           |                                            |
| STREET ADDRESS | 150 N MARTINGALE RD          |                                            |
| CITY-ST-ZIP    | SCHAUMBURG IL                |                                            |
| TITLE          | SVD                          | <input checked="" type="checkbox"/> DELETE |
| NAME           | THEOPHILOS, THEODORE J.      |                                            |
| STREET ADDRESS | 150 N MARTINGALE RD.         |                                            |
| CITY-ST-ZIP    | SCHAUMBURG IL                |                                            |
| TITLE          | VP                           | <input checked="" type="checkbox"/> DELETE |
| NAME           | KLUTCH, ALAN J.              |                                            |
| STREET ADDRESS | 187 DANBURY RD               |                                            |
| CITY-ST-ZIP    | WILTON CT                    |                                            |
| TITLE          | S                            | <input type="checkbox"/> DELETE            |
| NAME           | DRESDOW, MARY A.             |                                            |
| STREET ADDRESS | 150 N MARTINGALE RD          |                                            |
| CITY-ST-ZIP    | SCHAUMBURG IL                |                                            |
| TITLE          | T                            | <input checked="" type="checkbox"/> DELETE |
| NAME           | PHILIP C. DANFORD            |                                            |
| STREET ADDRESS | 187 DANBURY RD               |                                            |
| CITY-ST-ZIP    | WILTON CT                    |                                            |
| TITLE          | D                            | <input type="checkbox"/> DELETE            |
| NAME           | NIELSEN, JR ARTHUR C         |                                            |
| STREET ADDRESS | 1419 LAKE COOK RD, SUITE 480 |                                            |
| CITY-ST-ZIP    | DEERFIELD IL                 |                                            |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                                                                              |
|--------------------|------------------------------------------------------------------------------|
| 1.1 TITLE          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           |                                                                              |
| 1.3 STREET ADDRESS | 177 Broad Street                                                             |
| 1.4 CITY-ST-ZIP    | Stamford, CT 06901                                                           |
| 2.1 TITLE          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME           | EVP                                                                          |
| 2.3 STREET ADDRESS | Earl H. Doppelt                                                              |
| 2.4 CITY-ST-ZIP    | 177 Broad Street                                                             |
| 3.1 TITLE          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME           | VP & Asst. Sec.                                                              |
| 3.3 STREET ADDRESS | Ellenore O'Hanrahan                                                          |
| 3.4 CITY-ST-ZIP    | 177 Broad Street                                                             |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 4.2 NAME           |                                                                              |
| 4.3 STREET ADDRESS |                                                                              |
| 4.4 CITY-ST-ZIP    |                                                                              |
| 5.1 TITLE          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME           | Treasurer                                                                    |
| 5.3 STREET ADDRESS | Frank D. Martell                                                             |
| 5.4 CITY-ST-ZIP    | 177 Broad Street                                                             |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 6.2 NAME           |                                                                              |
| 6.3 STREET ADDRESS |                                                                              |
| 6.4 CITY-ST-ZIP    |                                                                              |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Mary A. Dresdow*  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary

1/25/97

847-605-5093

Date

Daytime Phone #

CR2E034 (9/96)

A. C. NIELSEN COMPANY

ADDITIONAL OFFICERS

| <u>NAME</u>            | <u>POSITION</u>                               | <u>ADDRESS</u>                              |
|------------------------|-----------------------------------------------|---------------------------------------------|
| Nicholas L. Trivisonno | Chairman                                      | 177 Broad St. Stamford, CT 06901            |
| Michael P. Connors     | Vice Chairman                                 | 177 Broad St. Stamford, CT 06901            |
| Earl H. Doppelt        | Executive Vice President &<br>General Counsel | 177 Broad St. Stamford, CT 06901            |
| Michael J. Brooks      | Sr. Vice President, Finance & CFO             | 150 N. Martingale Rd., Schaumburg, IL 60173 |
| Marie Fahrenbach       | Controller                                    | 150 N. Martingale Rd., Schaumburg, IL 60173 |
| R. James Cravens       | Assistant Secretary                           | 150 N. Martingale Rd., Schaumburg, IL 60173 |
| R. Ford Dallmeyer      | Assistant Secretary                           | 150 N. Martingale Rd., Schaumburg, IL 60173 |
| Edward J. Riehl        | Assistant Secretary                           | 150 N. Martingale Rd., Schaumburg, IL 60173 |

ADDITIONAL DIRECTORS

| <u>NAME</u>            | <u>ADDRESS</u>                   |
|------------------------|----------------------------------|
| Michael P. Connors     | 177 Broad St. Stamford, CT 06901 |
| Nicholas L. Trivisonno | 177 Broad St. Stamford, CT 06901 |