2007 FOR PROFIT CORPORATION ANNUAL REPORT.

DOCUMENT # F06000007841

1. Entity Name

SIGNATURE

HARTE-HANKS MARKET RESEARCH, INC.



FILED Jul 23, 2007 08:00 AM Secretary of State

Principal Place of Business

200 CONCORD PLAZA DR SUITE 800 SAN ANTONIO, TX 78216 Mailing Address

200 CONCORD PLAZA DR SUITE 800 SAN ANTONIO, TX 78216



DO NOT WRITE IN THIS SPACE

07162007 No Chg-P CR2E034 (11/05)

4. FEI Number
22-2086002

Applied For
Not Applicable

5. Certificate of Status Desired

S8.75 Additional
Fee Regulred

6. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its registered office	e or registered agent, or both, in the State of Florida. I am familiar w	ith, and accept
	the obligations of registered agent.	U00000770039	
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07/23/07-80006-025 150.00

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

OFFICERS AND DIRECTORS 10. TITI F HAMILTON, LISA NAME STREET ADDRESS 55 FIFTH AVE 14TH FLOOR -CITY-ST-ZIP NEW YORK, NY 10003 TITLE HARTE, HOUSTON H NAME STREET ADDRESS 200 CONCORD PLAZA DR SUITE 800 CITY-ST-ZIP SAN ANTONIO, TX 78216 DVP TITLE FRANKLIN, LARRY NAME 200 CONCORD PLAZA DR SUITE 800 STREET ADDRESS CITY-ST-ZIP SAN ANTONIO, TX 78216 TITLE DVP HOCHHAUSER, RICHARD M NAME 55 FIFTH AVE 14TH FLOOR STREET ADDRESS NEW YORK, NY 10003 CMY-ST-ZIP **VPS** TITLE BLYTHE, DEAN H NAME 200 CONCORD PLAZA DR SUITE 800 STREET ADDRESS SAN ANTONIO, TX 78216 CITY-ST-ZIP TITLE NAME ORTIZ, FEDERICO 200 CONCORD PLAZA DR SUITE 800 STREET ADDRESS CITY-ST-7IP SAN ANTONIO, TX 78216

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, withall other like empowered.

SIGNATURE:

ATURE AND TYPED OR PRINTED POLE OF BIGNING OFFICER OR DE

July 16,2007

(210)829-9358