




2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2005 8:00 am
Secretary of State

02-18-2005 90049 028 ***150.00

DOCUMENT # F82068 1. Entity Name PRECISION RESPONSE CORPORATION			
Principal Place of Business 8151 PETERS ROAD SUITE 4000 PLANTATION, FL 33324		Mailing Address 8151 PETERS ROAD SUITE 4000 PLANTATION, FL 33324	
2. Principal Place of Business 8151 Peters Road Suite, Apt. #, etc. Ste 3000 City & State Plantation FL Zip 33324 Country U.S.		3. Mailing Address 8151 Peters Road Suite, Apt. #, etc. Ste 3000 City & State Plantation FL Zip 33324 Country U.S.	
		50017195 	
		02012005 Chg-P CR2E034 (10/03)	
4. FEI Number 59-2194806		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 E. PARK AVE. TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CFO	TITLE	CEO
NAME	HALL, JOHN <input checked="" type="checkbox"/> Delete	NAME	Hall, John G. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8151 PETERS ROAD, STE 3000	STREET ADDRESS	8151 Peters Rd. Ste 3000
CITY-ST-ZIP	FORT LAUDERDALE, FL 33324	CITY-ST-ZIP	Plantation, FL 33324
TITLE	D	TITLE	COO
NAME	KHOSROWSHAHI, DARA <input checked="" type="checkbox"/> Delete	NAME	Livingston, Joseph <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	152 W 57TH ST., 43RD FLR	STREET ADDRESS	8151 Peters Rd. Ste. 3000
CITY-ST-ZIP	NEW YORK, NY 10019	CITY-ST-ZIP	Plantation, FL 33324
TITLE	D	TITLE	VP/ Controller
NAME	ELLEN, DAVID <input checked="" type="checkbox"/> Delete	NAME	Collins, Paul <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8151 PETERS ROAD, STE 3000	STREET ADDRESS	8151 Peters Rd. Ste 3000
CITY-ST-ZIP	FORT LAUDERDALE, FL 33324	CITY-ST-ZIP	Plantation, FL 33324
TITLE	S	TITLE	Director
NAME	KABOT, ERIC <input type="checkbox"/> Delete	NAME	Blatt, Gregory <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8151 PETERS ROAD, STE 3000	STREET ADDRESS	152 W. 57th St. 43rd Floor
CITY-ST-ZIP	FORT LAUDERDALE, FL 33324	CITY-ST-ZIP	New York, NY 10019
TITLE	CEO	TITLE	Director
NAME	CARDELLA, THOMAS <input checked="" type="checkbox"/> Delete	NAME	Melnerney, Thomas <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8151 PETERS RD, STE 4000	STREET ADDRESS	152 W. 57th St. 43rd Floor
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	New York, NY 10019
TITLE	VT	TITLE	CFO
NAME	OUTRAM, RICHARD <input checked="" type="checkbox"/> Delete	NAME	Outram, Ramesh "Richard" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8151 PETERS ROAD, STE 3000	STREET ADDRESS	8151 Peters Rd. Ste. 3000
CITY-ST-ZIP	FORT LAUDERDALE, FL 33324	CITY-ST-ZIP	Plantation FL 33324
12. I 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 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, with all other like empowered.			
SIGNATURE: 		Eric Kabot, Secretary	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 2/3/05 Daytime Phone # (954) 693-3700	

ATTACHMENT 50017195
#F82068

STATEMENT OF REQUESTED OFFICER DELETION

The following Officer, although not shown on the 2004 Florida Annual Report for Precision Response Corporation due to space constraints, should be removed ~~for~~_{for} the upcoming year (2005):

Rachel Macha, EVP of Sales