FILED May 21, 2002 8:00 am Secretary of State 05-21-2002 90881 048 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (FIRE)

		OUT OIL	(ODIX)	/	
DOCUMENT # F9300001918 1. Entity Name					
CATALINA MARKETING INTERNATIONAL				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
E	OO NOT WRITE	IN THIS SP	ACE		
2. Principat	I Place of Business	3. Mailing Address			
200 CARILLON PARKWAY 200 CARILI Suite, Apt. #, etc.		ON PARKWAY			
		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & St		City & State		4. FEI Number	Applied For
ST PET	TERSBURG FL	ST PETERSBU		33-0488896	Not Applicable
33716	- Country - USA	zip 33716	Country USA		75 Additional
		1 - 0 - 0		Fee 7. Name and Address of Current Registered Ag	Required
			Name :		ent
	DO NOT W	RITE	NRAI SE	ERVICES, INC	
			526 EAS	(P.O. Box Number is Not Acceptable) T PARK AVENUE	
	IN THIS SPA	ACE			
			City		
			TAT LAHA	ussee FL 3	2301
8. The abov	e named entity submits this statement	t for the purpose of changi	ing its registered office or i	egistered agent, or both, in the State of Florida.	
	•	•			
SIGNATURE	Signature, typed or printed name of registe	aread agent and title if a ii i	0.075.0		
	The second secon	60000000000000000000000000000000000000		gent signature required when reinstating)	ATE
9. This corp	oration is eligible to satisfy its Intangib requirement and elects to do so.	e January 1 - After Ma	May 1 Fee is \$150,00 y 1, Fee is \$550,00	10. Election Campaign Financing	#E00 =
(See crite	eria on back)	Amend	ed UBR is \$61.25	Truck Country	\$5.00 May Be Added to Fees
11.	OFFICERS AND DI		ble to Department of St	ite	, laded to rees
TITLE	CHIEF FINANCIAL				
NAME	DANIEL GRANGER		TITLE		
STREET ADDRESS	200 CARILLON PARKWAY		STREET ADDRESS		
CITY - ST - ZIP	ST PETERSBURG, FL 33716		CITY + ST - ZIP		
TITLE	PRESIDENT		TITLE		
NAME	MICHAEL BECHTOL		NAME		
STREET ADDRESS CITY - ST - ZIP	LEGG OTHITHHOM LTMINMAT		STREET ADDRESS		
	ST PETERSBURG, FL 33716		CITY+ST-ZIP		
TITLE NAME	EXEC. VP/SECRETARY JOSPEH PORT		TITLE		
STREET ADDRESS	200 CARILLON PARKWAY		NAME STREET ADDRESS		
CITY - ST - ZIP	ST PETERSBURG, FL 33716		CITY-ST-ZIP	DO NOT WRITE	
TITLE	VICE PRESIDENT		TITLE		
NAME	ERIC WILLIAMS		NAME	IN THIS SPACE	
STREET ADDRESS	200 CARILLON PARKWAY		STREET ADDRESS		
CITY - ST - ZIP	ST PETERSBURG, FL 33716		CITY - ST - ZIP		
TITLE	CFO/TREASURER		mle		
VAME STREET ADDRESS	CHRISTOPHER WOLF 200 CARILLON PARKWAY		NAME		
CITY - ST - ZIP	ST PETERSBURG, FL 33716		STREET ADDRESS		
TITLE	ASSISTANT SECRETARY		CITY - ST - ZIP		
	THOMAS BRISTOW		TITLE NAME		
NAME	LTHOMAS-BRISTOW				ecoecoscoscoscos(2000)
	THOMAS BRISTOW 200 CARILLON PAR	KWAY			
STREET ADDRESS CITY - ST - ZIP	200 CARILLON PAR ST PETERSBURG, F	L 33716	STREET ADDRÉSS		
NAME STREET ADDRESS CITY - ST - ZIP	200 CARILLON PAR ST PETERSBURG, F	L 33716	STREET ADDRESS CITY - ST - ZIP	n Section 119,07(3)(i), Florida Statutes Uturbor co	tifu that the
STREET ADDRESS CITY - ST - ZIP 13. I hereby ce information an officer o	200 CARILLON PAR ST PETERSBURG, F ortify that the information supplied with n indicated on this report or supplement or director of the corporation or the reco	L 33716 this filing does not qualify tal report is true and accurate or trustee empowers	STREET ADDRESS CITY - ST - ZIP for the exemption stated in rate and that my signature of the exemption is the exemption of the exemption is the exemption of the exemption in the exemption is the exemption of the exemption in the exemption is the exemption of the exemption in the exemption is the exemption of the exemption in the exemption is the exemption in the exemption in the exemption is the exemption in the exemption in the exemption is the exemption in the exemption in the exemption is th	Section 119.07(3)(i), Florida Statutes. I further cer shall have the same legal effect as if made under	tify that the oath; that I am
STREET ADDRESS CITY - ST - ZIP 13. I hereby ce information an officer o	200 CARILLON PAR ST PETERSBURG, F prify that the information supplied with	L 33716 this filing does not qualify tal report is true and accurate or trustee empowers	STREET ADDRESS CITY - ST - ZIP for the exemption stated in rate and that my signature of the exemption is the exemption of the exemption is the exemption of the exemption in the exemption is the exemption of the exemption in the exemption is the exemption of the exemption in the exemption is the exemption of the exemption in the exemption is the exemption in the exemption in the exemption is the exemption in the exemption in the exemption is the exemption in the exemption in the exemption is th	n Section 119.07(3)(i), Florida Statutes. I further ce shall have the same legal effect as if made under required by Chapter 607, Florida Statutes; and tha	tify that the oath; that I am t my name

SIGNATURE:

ASST SECRETARY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02 727-579-5000