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FILED

May 15 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 # F94000002720 (0)

1. Corporation Name
DATA BROADCASTING CORPORATION

Principal Place of Business
1800 S NORFOLK ST
SAN MATEO CA 94403

Mailing Address
100 EXECUTIVE DRIVE
SUITE 335
WEST ORANGE NJ 07052-3309



3. Date Incorporated or Qualified 05/24/1994
3a. Date of Last Report 05/23/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	13-3668779	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	☐ Change ☐ Addition
NAME	HIRSCHFIELD, ALAN J	1.2 NAME	
STREET ADDRESS	1150 FALL CREEK ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WILSON WY 83014	1.4 CITY-ST-ZIP	
TITLE	CEO	2.1 TITLE	☐ Change ☐ Addition
NAME	TESSLER, ALLAN R	2.2 NAME	
STREET ADDRESS	3875 WEST MORLEY DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	TETON VILLAGE WY 83025	2.4 CITY-ST-ZIP	
TITLE	EVP	3.1 TITLE	☒ Change ☐ Addition
NAME	IMPERIALE, MARK	3.2 NAME	
STREET ADDRESS	12 WEST ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	☒ Change ☐ Addition
NAME	ANDERSON, ED	4.2 NAME	
STREET ADDRESS	1927 SAINT NORBERT DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DANVILLE CA 94526	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	☐ Change ☐ Addition
NAME	NISIVOCCIA, THOMAS J	5.2 NAME	
STREET ADDRESS	58 WALSHINGHAM RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	MENDHAM NJ 07945	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	☒ Change ☐ Addition
NAME	FARBER, A. STEPHEN	6.2 NAME	
STREET ADDRESS	19 LAMINGTON DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	SUCCASUNNA NJ 07876	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

[Signature]

6 29 97 201

CR2E034 (9/96)