PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 NOV -5 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000002720

REINSTATEMENT 01-02

1. Corporation Name

Data Broadcasting Corporation

2. Principal Office Address	3. Mailing Office Address
32 Crosby Drive	100 Executive Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	Suite 335
City & State	City & State
Bedford MA	West Orange NJ
Zip / Country	Zip / Country
01730 USA	07052 USA

4. Date Incorporated or Qualified To Do Business in Florida: 5/24/1994

5. FEI Number: 13-3668779 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **$8.75** Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Road

300008770118
11/04/02--01011--010 **900.00

Suite, Apt. #, Etc.:

City: Plantation | State: FL | Zip Code: 33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Jennifer Mezza — REGISTERED AGENT MUST SIGN — Date: 10/25/02

CR2E081 (9/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Stuart Clark	74 Rodgers Road	Carlisle MA 01741
V	Steven G. Crane	4 Michael Lane	Sudbury MA 01776
S	Thomas J. Nisivoccia	12 Knollwood Trail East	Mendham NJ 07945
D	Alan J. Hirschfield	1150 Falls Creek Road	Wilson WY 83014
D	Allan R. Tessler	1100 West Pine Siskin Road	Jackson WY 83001
D	Stephen Hill	23 Parksfield Putney	London SW156NH

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Thomas J. Nisivoccia — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 10-18-02 — Daytime Phone #: 973-736-5683

STF FL32524F.1

JP 11/5/02