FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002069 (1)

BENCHMARK MEDIA SERVICES, INC.

Principal Place	e of Business	Mailing Address					e nations guid imimi mirit dutit marts musit autili until until until until until until todi					
3800 ANNAPOLIS LANE NORTH PLYMOUTH MN 55447		3800 ANNAPOLIS LANE NORTH PLYMOUTH MN 55447-5441										
						3.	Date Incorporate	ed or Qualified	3a . Da	ite of Last F	Report	
							04/28/1995		04/0	03/1996		
2. Principal Pl	2a. Mailing Address	iling Address			4.	FEI Number			Ar	pplied For		
21		26					41-1670847 Not Applicable					
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5.	Certificate of Sta	atus Desired	\boxtimes		Additional		
22		27				 			 	equired		
City & State	3	City & State			6.	Election Campai	-	r1		May Be		
23 Zip	Country	28	1 60	untry			Trust Fund Cont	······································			to Fees	
24	25	29	30	u: ni y		8.	This corporation Florida Statutes		ntangible] Yes [s. 199.032,	
24]	9. Name and Address of Curren	<u> </u>	[30]	Т		10.	Name and Add					
CT (CORPORATION SYSTEM	<u>Y</u>		81	Name				•	 		
1200 SOUTH PINE ISLAND ROAD												
PLANTATION FL 33324				82	Street A	Address (F	P.O. Box Number	is Not Acceptab	ele)			
FLA	TIATION IE 33324			83		•						
											<u>.</u>	
				84	City				FL	85 Zip	Code	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the a	above-r	named	corporation	on submits this sta	atement for the p	urnose of	changing i	its registered	
office or re	egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was	authorize	ed by ti	he corp	oration's	board of directors	s. I hereby accer	t the app	ointment as	registered	
J	m rammar with, and accept the obliga	Thomas of Goodbard Co. Coop. 1	iona si	ilules.								
SIGNATURE	Signature, typed or printed harrie of registered age	nt and title if applicable (NC	TE: Register	ed Agent	signature	required whe	n reinstating)		DATE		*************	
12.	OFFICERS AND		13.				ADDITIONS/CHA	NGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	PD	X DELETE	1.1 7	TITLE						Change	Addition	
NAME	Martella, Donald e		1.21	NAME								
STREET ADDRESS	3800 ANNAPOLIS LANE, SUITE	165	1.33	STREET AL	ODRESS							
CITY-S1-ZIP	PLYMOUTH MN 55447-5441		1,4 (CITY-ST-	ZIP						·····	
TITLE	V	DELETE	2.1	IITLE						☐ Change	Addition Addition	
NAME	HANSING, THOMAS J		2.21	NAME				*	•			
STREET ADDRESS	3800 ANNAPOLIS LANE, SUITI	E 165	2.3	STREET AL	ODRESS							
CITY-ST-ZIP	PLYMOUTH MN 55447-5441			CITY-ST-	ŽIP .				1			
TITLE	V	L] DELETE	1	TITLE					•	Change	Addition	
NAME	LYTLE, DENNIS B			NAME								
STREET ADDRESS	3800 ANNAPOLIS LANE, SUITI	E 165	3.3	street al	DDRESS							
CITY-ST-ZIP	PLYMOUTH MN 55447-5441	E 05.555		CITY-ST-	ZIP					T 1 &	CTL LATER.	
TITLE	V	▼ DELETE		IITLE						Change	Addition	
NAME	SCULLY, DAN	- 445		NAME								
STREET ADDRESS	3800 ANNAPOLIS LANE, SUITI	E 165		STREET AL								
CITY-ST-ZIP	PLYMOUTH MN 55447-5441	L DC) EXC		CITY-ST-	ZIP					TT 65	1 1 2 2 1 1 2 2	
TITLE	V	L] DELETE		TITLE						☐ Change	Addition	
NAME	NEITZKE, THOMAS M			NAME								
STREET ADDRESS	3800 ANNAPOLIS LANE, SUITI	± 165		STREET AL								
CITY-ST-ZIP	PLYMOUTH MN 55447-5441	DELETE		CITY-ST-	ZIP	.44 /				Change	X Addition	
TITLE	VP	No nereste	1	TITLE		VP- SA				-	M MODITION	
NAME CIRCLI ADORCEC	OLSON, ROBERT L	= 10E		NAME Proces 44	oonree	2012	Kozachek Annpolis	LANEN S	Suite .	165		
STREET ADDRESS	3800 ANNAPOLIS LANE, SUITI	2 100		STREET A		01	mthe HIN	CEUU			•	
CITY-ST-ZIP	PLYMOUTH MN by certify that the information supplier	d with this filing does not gua	lify for the	CITY-ST- e exem	ntion s	tated in S	ection 119.07(3)(i) Florida Statute	s. I furthe	r certify tha	t the	
informatio	on indicated on this annual report or s	upplemental annual report is	true and	accur	ate and	that my s	ignature shall have	ve the same lega	al effect as	s if made ur	nder oath; that	
appears i	on indicated on this annual report or s flicer or director of the corporation or in Block 12 or Block 13 if changed, or	r on an attachment with ap ac	ddress.	execu	មេបានក	eportas r	equired by Chapi	iei our, Florida S	olalules, 6	no mat my	name	