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GYGRUYARY OF STATE TALLAMASSEE, FLORIDA

## CR2E034 (11/98)

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9800004677

CATALINA MARKETING SALES CORPORATION

Principal Plac	e of Business	Mailing Address			
11300 9TH STE ST. PETERSBUI		11300 9TH STREET NORTH ST. PETERSBURG FL 33716			
V		S ElEnopolio (E opi iv		DO NOT WRITE IN THIS SPACE	
}				3. Date Incorporated or Qualifed	
				08/17/1998	
2. Principal P	lace of Business	2a, Mailing Address		4. FELNumber	Applied For
21		26		33-0488894	Not Applicable
Surte, Apt	# etc	Suite, Apt #, etc	•	55 0400054	\$8.75 Additional
22	<i>A</i> , 0.0.	27		5. Certificate of Status Desired [	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ir Intangible
24	25	29	30	Personal Property Tax	X(Yes [∃No
•	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	red Agent
[			81 Name	NRAI Services	lac
	CORPORATION SYSTEM		82 Street Add		inc.
1	) <b>South Pine</b> Island Road		62 Sueer Add	526 E Park Ave	
PLA	NTATION FL 33324		83	OZG FRAIR HOU	
ļ					
			<b>84</b> City -	Tallahassee 1	85 Zip Code
44 6	N. H	4.603.4600 [53-24, 63, 1]			FL    32361
office or r	to the provisions of Sections 607,0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	if Florida, Such change was au	thorized by the corporati	poration submits this statement for the purpos on's board of directors. Thereby accept the a	e of Changing its registered ppointment as registered
	m familiar with and accept the boligati	2	oa Statutes	11/2.10	· ·
SIGNATURE	Signature, typed or printed name of registered agent	and the dapph at in (NOTE)	Registered Agent signature region	7/27/7 OATI	7
12.	OFFICERS AND	DIRECTORS ,	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE	VSD	DELETE	1110 P	S	[ ] Change 🔀 Additi
NAME	LIVINGSTON, PHILIP	3	12 NAME	pere W. Toffer	-
STREET ADDRESS	11300 9TH STREET NORTH		13 STREET ADDRESS 112	reeze, W. Jettrey	
CITY-ST-ZIP	ST. PETERSBURG FL 33716		14 City - St - Zift	t. Petersburg, FL 33716	
TITLE	T	[   DELFTE	21 THE	1. retesoury, 10 by 10	[ Change       Add to
NAME	WOLF, CHRISTOPHER		22 NAME	20000295	C
STREET ADDRESS	11300 9TH STREET NORTH		20 STREET ADDRESS	20000285 -04/30/93-	-01137008
	ST. PETERSBURG FL 33716			****150.0	0 ****150.00
CITY-ST-ZIP	PD PD	[ ] DELETE	2 4 OTY-ST-ZIP 3 1 TRUE	**************************************	Fighange Fiadda
į		FIDEGER			Elenande El Modes
NAME	GRANGER, DAN		3.2 NAME		
STREET ADDRESS	11300 9TH STREET NORTH		33 STREET ADORESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33716		34 CCY-ST-Z#		
TITLE	AS:	[ ] DELETÉ	41 TITLE		El Charge El Adddi

14. Thereby 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 discreted on this annual report or supplemental armual report is true and accurate and that my signature shall have the same legal effect as it 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, with all other like empowered.

5 1 111LE

62 NAME

4 2 NAME

4 3 STREET ACIDRESS

**50 STREET ACORESS** 

63 STREET ADDRESS

4.4.C(1) Y-ST-Z(F

**SIGNATURE** 

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

HALAK, JOHN

OFF, GEORGE W

GREER, TOMMY D

11300 9TH STREET NORTH

ST. PETERSBURG FL 33716

11300 9TH STREET NORTH

ST. PETERSBURG FL 33716

11300 9TH STREET NORTH

SIGNATURE MATTER O CHA

W, JEFFAE.

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4/26/5

727-579-5000

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