

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P38274** (7)

1. Corporation Name
CATALINA MARKETING CORPORATION



Principal Place of Business: **% ACCTS. PAYABLE
11300 9TH STREET NORTH
ST. PETERSBURG FL 33716-2329**

Mailing Address: **C/O TAX DEPT.
11300 9TH STREET NORTH
ST. PETERSBURG FL 33716-2329
US**

3. Date Incorporated or Qualified: **04/10/1992** 3a. Date of Last Report: **03/02/1995**

4. FEI Number: **33-0499007** Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21
22. Suite, Apt. #, etc.:
23. City & State:
24. Zip: 25. Country:

2a. Mailing Address: 26
27. Suite, Apt. #, etc.:
28. City & State:
29. Zip: 30. Country:

9. Name and Address of Current Registered Agent: **C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent: 81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 84 City: **FL** 85 Zip Code:

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE: CD	2. NAME: GREER, TOMMY D	1.1 TITLE: <input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. STREET ADDRESS: 11300 9TH ST NORTH		1.2 NAME:	
4. CITY, ST, ZIP: ST. PETERSBURG FL		1.3 STREET ADDRESS:	
5. TITLE: PD	6. NAME: OFF, GEORGE W	1.4 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7. STREET ADDRESS: 11300 9TH ST NORTH		2.1 TITLE:	
8. CITY, ST, ZIP: ST. PETERSBURG FL		2.2 NAME:	
9. TITLE: VT	10. NAME: O'CONNOR, WILLIAM E	2.3 STREET ADDRESS:	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
11. STREET ADDRESS: 11300 9TH ST NORTH		2.4 CITY, ST, ZIP:	
12. CITY, ST, ZIP: ST. PETERSBURG FL		3.1 TITLE: VT	
13. TITLE: D	14. NAME: COLLINS, PATRICK	3.2 NAME: PHILIP LIVINGSTON	
15. STREET ADDRESS: 11300 9TH ST NORTH		3.3 STREET ADDRESS: 11300 9TH ST. NORTH	
16. CITY, ST, ZIP: ST. PETERSBURG FL		3.4 CITY, ST, ZIP: ST. PETERSBURG, FL	33716
17. TITLE: D	18. NAME: D'AGOSTINO, STEPHEN I	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
19. STREET ADDRESS: 11300 9TH ST NORTH		4.2 NAME:	
20. CITY, ST, ZIP: ST. PETERSBURG FL		4.3 STREET ADDRESS:	
21. TITLE: D	22. NAME: MENDELL, THOMAS G	4.4 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23. STREET ADDRESS: 11300 9TH ST NORTH		5.1 TITLE:	
24. CITY, ST, ZIP: ST. PETERSBURG FL		5.2 NAME:	
		5.3 STREET ADDRESS:	
		5.4 CITY, ST, ZIP:	
		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME:	
		6.3 STREET ADDRESS:	
		6.4 CITY, ST, ZIP:	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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]* **BEN GASPARINI** 2/6/96 (813) 579-5000

CR2E034 (12/95)

CATALINA MARKETING CORPORATION
LIST OF OFFICERS AND DIRECTORS

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Helene Monat	Executive Vice President and Director	Mack Centre I 385 West Passaic St. Rochelle Park, NJ 07862
Karl Meggard	Executive Vice President	11300 Ninth St. North St. Petersburg, FL 33716
Barry A. Brooks	Secretary	11300 Ninth St. North St. Petersburg, FL 33716
Wilma M. Tarson	Assistant Secretary	11300 Ninth St. North St. Petersburg, FL 33716
Robert A. Busch	Assistant Secretary	11300 Ninth St. North St. Petersburg, FL 33716
Ben Gasperini	Assistant Secretary	11300 Ninth St. North St. Petersburg, FL 33716
Thomas W. Smith	Director	11300 Ninth St. North St. Petersburg, FL 33716
Dianne C. Walker	Director	11300 Ninth St. North St. Petersburg, FL 33716
Frederick W. Beinecke	Director	11300 Ninth St. North St. Petersburg, FL 33716
Michael B. Wilson	Director	11300 Ninth St. North St. Petersburg, FL 33716