


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000007841

1. Entity Name
 HARTE-HANKS MARKET RESEARCH, INC.



Principal Place of Business Mailing Address

200 CONCORD PLAZA DR SUITE 800 200 CONCORD PLAZA DR SUITE 800
 SAN ANTONIO, TX 78216 SAN ANTONIO, TX 78216

DO NOT WRITE IN THIS SPACE



07162007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 22-2086002 Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE 07/23/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

U00000770039
 07/23/07-80006-025 150.00

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMILTON, LISA 55 FIFTH AVE 14TH FLOOR NEW YORK, NY 10003
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HARTE, HOUSTON H 200 CONCORD PLAZA DR SUITE 800 SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP FRANKLIN, LARRY 200 CONCORD PLAZA DR SUITE 800 SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HOCHHAUSER, RICHARD M 55 FIFTH AVE 14TH FLOOR NEW YORK, NY 10003
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS BLYTHE, DEAN H 200 CONCORD PLAZA DR SUITE 800 SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ORTIZ, FEDERICO 200 CONCORD PLAZA DR SUITE 800 SAN ANTONIO, TX 78216

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Federico Ortiz Federico Ortiz, July 16, 2007 (210) 829-9358

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #