



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000153861		2. Name of Corporation VALASSIS DATA MANAGEMENT, INC.			
3. Street Address Principal Business Office 19975 VICTOR PARKWAY			City LIVONIA	State MI	Zip 48152
4. Business Phone No. 734-591-3000		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island PROMOTIONAL MATERIALS/ADVERTISING AND PREPRINTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STEVE MITZEL			Vice President Name TODD WISELEY		
Street Address ONE TARGETING CENTRE			Street Address 19975 VICTOR PARKWAY		
City WINDSOR	State CT	Zip 06095	City LIVONIA	State MI	Zip 48152
Secretary Name TODD WISELEY			Treasurer Name STEVE MITZEL		
Street Address 19975 VICTOR PARKWAY			Street Address ONE TARGETING CENTRE		
City LIVONIA	State MI	Zip 48152	City WINDSOR	State CT	Zip 06095
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name STEVE MITZEL			Director Name TODD WISELEY		
Street Address ONE TARGETING CENTRE			Street Address 19975 VICTOR PARKWAY		
City WINDSOR	State CT	Zip 06095	City LIVONIA	State MI	Zip 48152
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			1,000	COMMON	0.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date	2-23-09
Check No.	50042599
By:	mnc
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: Todd Wiseley Date: 2/20/09
Print or Type Name: Todd Wiseley
Title: officer