

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000096423

Entity Name: FIDELITY NATIONAL GLOBAL CARD SERVICES, INC.

Current Principal Place of Business:

601 RIVERSIDE AVE.
JACKSONVILLE, FL 32204

Current Mailing Address:

601 RIVERSIDE AVE.
JACKSONVILLE, FL 32204 US

FEI Number: 58-2652375

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name KELLER, CHARLES H.
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

Title TREASURER
Name DAUGHTREY, VIRGINIA A.
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

Title ASSISTANT SECRETARY
Name BURGESS, DEBRA H
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name VASILEFF, ANN M.
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name MAYO, MARC M
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

Title PRESIDENT AND CHIEF EXECUTIVE OFFICER
Name NORCROSS, GARY A.
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

Title CFO
Name WOODALL, JAMES W
Address 601 RIVERSIDE AVE.
City-State-Zip: JACKSONVILLE FL 32204

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DEBRA H BURGESS

ASSISTANT SECRETARY 05/30/2020

Electronic Signature of Signing Officer/Director Detail

Date