

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000168326

**Entity Name:** CONSUMER INCENTIVE PROGRAMS, INC.**Current Principal Place of Business:**1905 PERIMETER PARK ROAD  
FERNANDINA BEACH, FL 32034**Current Mailing Address:**PO BOX 17071  
FERNANDINA BEACH, FL 32035 US**FEI Number:** 20-1999701**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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 DIRECTOR  
Name LENKER, MAX  
Address 142 CANNONBALL LANE  
City-State-Zip: WATERSOUND FL 32461

Title DIRECTOR  
Name MORAN, ALLISON BOLCH  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

Title ASST. SECRETARY  
Name AKERS, JOSEPH H  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

Title CHAIRMAN, DIRECTOR  
Name BOLCH, CARL E JR.  
Address 1250 SPYGLASS LANE  
City-State-Zip: NAPLES FL 34102

Title SECRETARY, DIRECTOR  
Name BOLCH, SUSAN B  
Address 1250 SPYGLASS LANE  
City-State-Zip: NAPLES FL 34102

Title ASST. SECRETARY, DIRECTOR  
Name DUMBACHER, ROBERT J  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

Title PRESIDENT  
Name MILAM, BILL  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

Title DIRECTOR  
Name MORHOUS, NATALIE BOLCH  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

**Continues on page 2**

*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:** JOSEPH H. AKERS**ASSISTANT SECRETARY** 04/13/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name ISBILL, MELANIE BOLCH  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

Title CFO  
Name MCBRAYER, MAX E JR.  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339

Title DIRECTOR  
Name BOLCH, JORDAN BASS  
Address 200 GALLERIA PARKWAY SE  
SUITE 900  
City-State-Zip: ATLANTA GA 30339