

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000088201

**Entity Name:** FINANCIAL DATA SERVICES, INC.

**Current Principal Place of Business:**

4800 DEER LAKE DRIVE EAST  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

4800 DEER LAKE DRIVE EAST  
ATTN: KELLEY WOODS  
JACKSONVILLE, FL 32246

**FEI Number:** 13-3749871

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 S 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 PD  
Name BRIDY, WILLIAM A  
Address 4800 DEER LAKE DRIVE EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title VP  
Name WOODS, KELLEY J  
Address 4800 DEER LAKE DRIVE EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title VP  
Name DEATS, JAMES J  
Address 4800 DEER LAKE DRIVE EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title VP  
Name AVERA, STEVEN M  
Address 4800 DEER LAKE DRIVE EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title VP  
Name REDMOND, VALERIE J  
Address 4800 DEER LAKE DRIVE EAST  
City-State-Zip: JACKSONVILLE FL 32246

*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:** KELLEY WOODS

**CFO**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date