## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000006163

**Entity Name: METAVANTE CORPORATION** 

**Current Principal Place of Business:** 

4900 WEST BROWN DEER ROAD BROWN DEER. WI 53223

**Current Mailing Address:** 

4900 WEST BROWN DEER ROAD BROWN DEER. WI 53223 US

FEI Number: 39-1165550 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

PRESIDENT / DIRECTOR Title Title CORPORATE SECRETARY /

DIRECTOR

NORCROSS, GARY A. Name OATES, MICHAEL P. Name 601 RIVERSIDE AVE. Address

601 RIVERSIDE AVE. Address JACKSONVILLE FL 32204 City-State-Zip:

City-State-Zip: JACKSONVILLE FL 32204 Title ASSISTANT SECRETARY

SENIOR VICE PRESIDENT OF Title Name

BURGESS, DEBRA H. FINANCE AND TREASURER

COUTURIER, JASON L. Name Address 601 RIVERSIDE AVE. Address 601 RIVERSIDE AVE. City-State-Zip: JACKSONVILLE FL 32204

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.

04/12/2014 SIGNATURE: DEBRA H. BURGESS ASSISTANT SECRETARY

**FILED** Apr 12, 2014

**Secretary of State** 

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