

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004109

FILED
Apr 29, 2014
Secretary of State
CC8313253531

Entity Name: HEARTLAND PAYMENT SYSTEMS, INC.

Current Principal Place of Business:

90 NASSAU STREET
PRINCETON, NJ 08542

Current Mailing Address:

90 NASSAU STREET
PRINCETON, NJ 08542 US

FEI Number: 22-3755714

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 CEO, DIRECTOR
Name CARR, ROBERT O
Address 90 NASSAU STREET
City-State-Zip: PRINCETON NJ 05842

Title VC
Name BALDWIN, ROBERT HB JR.
Address 90 NASSAU STREET
City-State-Zip: PRINCETON NJ 05842

Title D
Name HOLLIN, MITCHELL L
Address 90 NASSAU STREET
City-State-Zip: PRINCETON NJ 08542

Title S
Name KALLENBACH, CHARLES HN
Address 90 NASSAU STREET
City-State-Zip: PRINCETON NJ 08542

Title D
Name VAGUE, RICHARD W
Address 90 NASSAU ST
City-State-Zip: PRINCETON NJ 08542

Title D
Name PALMER, JONATHAN J
Address 90 NASSAU ST.
City-State-Zip: PRINCETON NJ 08542

Title TREASURER
Name WHITE, JOSEPH E
Address 90 NASSAU STREET
City-State-Zip: PRINCETON NJ 08542

Title CFO
Name RUEDA , MARIA
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542

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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: CHARLES H N. KALLENBACH

SECRETARY

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BREAKIRON-EVANS, MAUREEN
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542

Title DIRECTOR
Name NIEHAUS, ROBERT H.
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542

Title PRESIDENT
Name GILBERT , DAVID
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542

Title DIRECTOR
Name OSTRO, MARC J. PHD
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542

Title PRESIDENT
Name DRYSDALE, IAN
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542

Title PRESIDENT
Name LAWLER, MICHAEL A.
Address 90 NASSAU STREET, 2 FLOOR
City-State-Zip: PRINCETON NJ 08542