## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006328

**Entity Name:** FSV PAYMENT SYSTEMS, INC.

**Current Principal Place of Business:**

6410 SOUTHPOINT PKWY
SUITE 200
JACKSONVILLE, FL 32216

**Current Mailing Address:**

1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

**FEI Number: 20-1668501**

**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: JEANNE NELSON                                                                05/08/2018

Electronic Signature of Registered Agent                                                 Date

**Officer/Director Detail :**

| | | | | |
|---|---|---|---|---|
| Title | DIRECTOR & TREASURER | | Title | EXECUTIVE VICE PRESIDENT |
| Name | MAJEED, ASIM K | | Name | POTRATZ, THOMAS R |
| Address | 700 DEERFIELD RD | | Address | 6410 SOUTHPOINT PKWY, SUITE 200 |
| City-State-Zip: | DEERFIELD IL 60015 | | City-State-Zip: | JACKSONVILLE FL 32216 |
| | | | | |
| Title | DIRECTOR & CEO | | Title | SECRETARY |
| Name | STEWARD, JOHN C | | Name | KRUSH, MATTHEW B |
| Address | 950 17TH STREET | | Address | 800 NICOLLET MALL |
| City-State-Zip: | DENVER CO 80202 | | City-State-Zip: | MINNEAPOLIS MN 55402 |
| | | | | |
| Title | ASSISTANT SECRETARY | | Title | DIRECTOR AND PRESIDENT |
| Name | BIDON, LINDA E | | Name | KLUKKEN, PETER L |
| Address | 800 NICOLLET MALL BC-MN-H21O | | Address | 302 W 3RD ST |
| City-State-Zip: | MINNEAPOLIS MN 55402 | | City-State-Zip: | CINCINNATI OH 45202 |

*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: LINDA E. BIDON                          ASSISTANT SECRETARY          05/08/2018

Electronic Signature of Signing Officer/Director Detail                                   Date