

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000002380

**Entity Name:** FIS PRONET SOLUTIONS, INC.**Current Principal Place of Business:**4313 EAST COTTEN CENTER BLVD.  
SUITE 120  
PHOENIX, AZ 85040**Current Mailing Address:**4313 EAST COTTEN CENTER BLVD.  
SUITE 120  
PHOENIX, AZ 85040 US**FEI Number:** 86-0841453**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title            PRESIDENT / DIRECTOR  
Name            NORCROSS, GARY A.  
Address        601 RIVERSIDE AVE.  
City-State-Zip: JACKSONVILLE FL 32204

Title            ASSISTANT SECRETARY  
Name            BURGESS, DEBRA H.  
Address        601 RIVERSIDE AVE.  
City-State-Zip: JACKSONVILLE FL 32204

Title            CORPORATE SECRETARY /  
DIRECTOR  
Name            OATES, MICHAEL P.  
Address        601 RIVERSIDE AVE.  
City-State-Zip: JACKSONVILLE FL 32204

Title            SENIOR VICE PRESIDENT OF  
FINANCE AND TREASURER  
Name            COUTURIER, JASON L.  
Address        601 RIVERSIDE AVE.  
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.*

**SIGNATURE:** DEBRA H. BURGESS**ASSISTANT SECRETARY    04/14/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date