# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2005**
**Secretary of State**

DOCUMENT# 856633

**Entity Name:** TOTAL SYSTEM SERVICES, INC.

**Current Principal Place of Business:**

1600 FIRST AVE.
COLUMBUS, GA 31901 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2506
COLUMBUS, GA 31902 US

**New Mailing Address:**

**FEI Number: 58-1493818** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | SVPC | ( ) Delete |
| Name: | WEAVER, DORENDA K | |
| Address: | 6436 FALL BRANCH DRIVE | |
| City-St-Zip: | COLUMBUS, GA | |
| Title: | C | ( ) Delete |
| Name: | USSERY, RICHARD W | |
| Address: | 1 MOUNTAIN RIDGE COURT | |
| City-St-Zip: | COLUMBUS, GA | |
| Title: | P | ( ) Delete |
| Name: | TOMLINSON, PHILIP W., | |
| Address: | 6611 WOODBERRY RD. | |
| City-St-Zip: | COLUMBUS, GA | |
| Title: | GCS | ( ) Delete |
| Name: | GRIFFITH, SANDERS | |
| Address: | 6288 BROOKSTONE BLVD | |
| City-St-Zip: | COLUMBIA, GA | |
| Title: | EVPT | ( ) Delete |
| Name: | LIPHAM, JAMES B., | |
| Address: | 3342 WINDERMERE ST. | |
| City-St-Zip: | COLUMBUS, GA | |
| Title: | AVP | ( ) Delete |
| Name: | HARRIS, ROBERT | |
| Address: | 58 WATERFALL WAY | |
| City-St-Zip: | CATAULA, GA 31804 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT HARRIS AVP 04/29/2005

Electronic Signature of Signing Officer or Director Date