2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 8:00 am Secretary of State

4-10-06

Daytime Phone #

DOCUMENT # F0200006344 1. Entity Name LOYALTYONE, INC.							04-24-200	06 90440	022 ***15	50.00	
Principal Place of Business 6101 MEIJER DRIVE MILFORD, OH 45159		Mailing Address 800 TECHCENTER DRIVE COLUMBUS, OH 43230				50016005					
2. Principal Pi	3. Mailing Address	illing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				04072006	Chg-P	CR2E0	34 (11/05)		
City & State Milford OH		City & State				4. FEI Number 31-174				plied For t Applicable	
Zip 45150 Country USA		Zip				5. Certificate of Status Desired					
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)							
FERNIATION, FE 33324											
				City	City FL Zip Code						
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.						00 May Be ed to Fees					
10.	OFFICERS AND I	DIRECTORS	11.			ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE	P Delete TITL				ρ				Change	Addition	
NAME	TAYLOR, KELVIN		NAM	[Neil	Everet	t Street Sui	te 200	,		
STREET ADDRESS CITY-ST-ZIP	6101 MEIJR DRIVE MILFORD, OH 45150			ET ADDRESS ST-ZIP	4110	Yonge -	stario M	7 02 B	7 CONO	dc	
TITLE	VP	☐ Delete	THUE		1010	on to, Or	TIGHTO M	Zrzu	Change	Addition	
NAME	RENTSCHLER, LYNNE	□ Delete	NAM					. · · ·		Addition	
STREET ADDRESS				ET ADDRESS	/000	O SUMM	it Drive,	Suite	200		
CITY-ST-ZIP	MILFORD, OH 45150		CITY	-ST-ZIP	M:	ford, o	H 45 159	·			
TITLE NAME	VPS	☐ Delete	TITLE						☐ Change	Addition	
STREET ADDRESS	UTAY, ALAN M 17655 WATERVIEW PARKWAY		NAMI STRE	ET AODRESS							
CITY-ST-ZIP	DALLAS, TX 75252			-ST - ZIP							
TITLE	VP	☐ Delete	TITLE						Change	Addition	
NAME	KUSCHILL, JAMES E		NAMI			5 S.mm	it Drive	. 54:1	PROO		
STREET ADORESS CITY-ST-ZIP	6101 MEIJER DRIVE MILFORD, OH 45159			ET ADDRESS - ST - Z#P	M·I	۱۳۰۸ ادماً ۱۳۰۸ ادماً	H 45150	/			
TITLE	VP	Delete	TITLE						Change	⊠ Addition	
NAME	CAPIZZI, MICHAEL T	y 0000	NAM	Ε	Leig	ah Am	K. Eppe	erson	_ ,	<u></u>	
STREET ADDRESS	6101 MEIJER DRIVE				176	55 Wa	ierview i	HOULL	nah		
CITY-ST-ZIP	MILFORD, OH 45159			-S1-7IP	<u>Oal</u>	las, TX	75252				
TITLE NAME	VP SCHUMACHER, RICHARD E JR.	☐ Delete	TITLE						Change	Addition	
STREET ADDRESS	800 TECHCENTER DRIVE			ET ADDRESS							
CITY-ST-ZIP	COLUMBUS, OH 43230		CITY	-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											

BIGNATURE AND TWO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: