

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002366

FILED
May 02, 2010
Secretary of State

Entity Name: SITEL CUSTOMER CARE, INC.

Current Principal Place of Business:

335 ONTARIO STREET
ST. CATHARINES, ONTARIO, ON L2R 5L3 CA

New Principal Place of Business:

Current Mailing Address:

165 LAWRENCE BELL DRIVE
BUFFALO, NY 14221

New Mailing Address:

FEI Number: 98-0391878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: FARINACCI, JOHN S
Address: 165 LAWRENCE BELL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: VD
Name: COPELAND, STEVEN A
Address: 335 ONTARIO STREET
City-St-Zip: ST. CATHARINES, ON L2R 5L3 CA

Title: S
Name: COPELAND, STEVEN A
Address: 335 ONTARIO STREET
City-St-Zip: ST. CATHARINES, ON L2R 5L3 CA

Title: T
Name: JANTZI, CRAIG S
Address: 3102 WEST END AVENUE
City-St-Zip: NASHVILLE, TN 37203 US

Title: D
Name: JANTZI, CRAIG S
Address: 3102 WEST END AVENUE
City-St-Zip: NASHVILLE, TN 37203 US

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: JOHN S. FARINACCI

P

05/02/2010

Electronic Signature of Signing Officer or Director

Date