## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004249

**Entity Name: MIDAMERICA GIFT CERTIFICATE COMPANY** 

Apr 13, 2011 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

401 WEST MAIN STREET, 4TH FLOOR 401 WEST MAIN STREET LOUISVILLE, KY 40202

4TH FLOOR

LOUISVILLE, KY 40202

**Current Mailing Address:** New Mailing Address:

C/O LISA I. MOBERLY BB&T C/O LISA I. MOBERLY BB&T

200 WEST SECOND STREET, 3RD FLOOR LEGAL 200 WEST SECOND STREET 3RD FLOOR LEGAL

WINSTON-SALEM, NC 27101 WINSTON-SALEM, NC 27101

FEI Number: 31-1556662 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324

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

## **OFFICERS AND DIRECTORS:**

Title:

Name: LAMAR, DONALD R

401 WEST MAIN STREET, 4TH FLOOR Address:

City-St-Zip: LOUISVILLE, KY 40202 US

Title:

ABELES, DAMARIS Name:

401 WEST MAIN STREET, 4TH FLOOR Address:

LOUISVILLE, KY 40202 US City-St-Zip:

Title: TVP FILAR, JOE Name:

401 WEST MAIN STREET, 4TH FLOOR Address:

City-St-Zip: LOUISVILLE, KY 40202 US

Title: DIR

QUALLS, SCOTT Name:

Address: 401 WEST MAIN STREET, 4TH FLOOR

City-St-Zip: LOUISVILLE, KY 40202

Title:

Name: WILSON III, CHARLES L

401 WEST MAIN STREET, 4TH FLOOR Address:

City-St-Zip: LOUISVILLE, KY 40202 US

Title:

Name: BRADLEY, BENNETT

401 WEST MAIN STREET, 4TH FLOOR Address:

City-St-Zip: LOUISVILLE, KY 40202 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: MANDELINE HENDRICKS POA 04/13/2011