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FILED
Jun 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000001966 (0)

1. Corporation Name

WESTERN UNION COMMUNICATIONS, INC.



Principal Place of Business

ONE MACK CENTRE DRIVE
C/O TAX DEPT 2-9
PARAMUS NJ 07652
US

Mailing Address

ONE MACK CENTRE DRIVE
C/O TAX DEPT. 2-9
PARAMUS NJ 07652-3806
US

2. Principal Place of Business

21 6200 S. Quebec St

2a. Mailing Address

26 6200 South Quebec St

Suite, Apt. #, etc.

22 #2508B

Suite, Apt. #, etc.

27 #2508B

City & State

23 Englewood, CO

City & State

28 Englewood, CO

Zip

24 80111

Country

25 US

Zip

29 80111

Country

30 US

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

04/15/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

22-3268902

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GEORGE D MCNARY
STREET ADDRESS 2534 E PENHURST PLACE
CITY-ST-ZIP HIGHLANDS RANCH CO

TITLE D ☐ DELETE

NAME ROBERT E. MYERS
STREET ADDRESS 5107 CASS STREET
CITY-ST-ZIP OMAHA NE

TITLE DT ☐ DELETE

NAME LAWRENCE S. FOGELSON
STREET ADDRESS 300 EAST 74TH ST., APT. 23A
CITY-ST-ZIP NEW YORK NY

TITLE AS ☐ DELETE

NAME GERALD L. POPOVSKY
STREET ADDRESS 343 N MONROE STREET
CITY-ST-ZIP RIDGEWOOD NJ

TITLE AS ☐ DELETE

NAME RAYMOND V. FORD
STREET ADDRESS 618 WASHINGTON STREET, APT 6B
CITY-ST-ZIP NEW YORK NY

TITLE AS ☐ DELETE

NAME R BRUCE AVERY
STREET ADDRESS 10 FOREST HILL ROAD
CITY-ST-ZIP WEST NORWALK CT

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Please See Attached

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

List of Officers

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

and Directors

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

4/21/97
K. S. P. 203/889-6004

CR2E034 (9/96)