

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000001966

1. Entity Name

WESTERN UNION COMMUNICATIONS, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90031 028 ***150.00

Principal Place of Business

Mailing Address

6200 S. QUEBEC ST.
2508B
ENGLEWOOD CO 80111
US

6200 SOUTH QUEBEC ST.
2508B
ENGLEWOOD CO 80111-4729
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-3268902

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE FL 32301

Name

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--------------------------|--|
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | YERINGTON, MICHAEL C | |
| STREET ADDRESS | ONE MACK CENTRE DR | |
| CITY-ST-ZIP | PARAMUS NJ 07652 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | PATMORE, KIMBERLY S | |
| STREET ADDRESS | 5083 E OTERO CIR | |
| CITY-ST-ZIP | LITTLETON CO 80122 | |
| TITLE | AS | <input type="checkbox"/> Delete |
| NAME | SKENE-STIMAC, PHYLLIS | |
| STREET ADDRESS | 6200 S QUEBEC ST STE 250 | |
| CITY-ST-ZIP | ENGLEWOOD CO 80111 | |
| TITLE | S | <input checked="" type="checkbox"/> Delete |
| NAME | SHARIRO, DAVID | |
| STREET ADDRESS | ONE MACK CENTRE DR | |
| CITY-ST-ZIP | PARAMUS NJ 07652 | |
| TITLE | AT | <input checked="" type="checkbox"/> Delete |
| NAME | VERY, R B | |
| STREET ADDRESS | 1819 BISHOPS GREEN DR | |
| CITY-ST-ZIP | MARIETTA GA 30062 | |
| TITLE | T | <input type="checkbox"/> Delete |
| NAME | PATMERE, KIMBERLY | |
| STREET ADDRESS | 6200 SD AVEBEC ST | |
| CITY-ST-ZIP | ENGLEWOOD CO 80111 | |

| | | |
|----------------|--------------------------|--|
| TITLE | President / Director | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | 6200 South Quebec street | |
| CITY-ST-ZIP | Englewood, CO 80111 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | Secretary | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Jon Reese | |
| STREET ADDRESS | One-Mack Centre Drive | |
| CITY-ST-ZIP | Paramus, NJ 07652 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | Treasurer / CFO / VP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | 6200 South Quebec street | |
| CITY-ST-ZIP | Englewood, CO 80111 | |

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David Shariro*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/2000
Date

303-488-8237
Daytime Phone #

CR/EX/14 (3/99)

194/0000019264

00067523

WESTERN UNION COMMUNICATIONS, INC.
OFFICERS AND DIRECTORS

OFFICERS

| | | |
|-------------------------------------|--|--|
| Kimberly S. Patmore | Vice President Treasurer Chief Financial Officer | HOME: 5083 East Otero Circle Littleton, CO 80122 BUSINESS: 6200 South Quebec Street Englewood, CO 80111 |
| Jon Reese | Secretary | HOME: 11 Mathew Drive Annandale, NJ 08801 BUSINESS: One Mack Centre Drive Paramus, NJ 07652 |
| Phyllis Skene-Stimac | Assistant Secretary | HOME: 8079 Clay Street Westminster, CO 80030 BUSINESS: 6200 South Quebec Street Englewood, CO 80111 |
| Michael C. Yerington 572-74-4997 | President | HOME: 8438 Owl Roost Court Parker, CO 80134 BUSINESS: 6200 South Quebec Street Englewood, CO 80111 |

DIRECTORS

| | |
|----------------------|---|
| Michael C. Yerington | 6200 South Quebec Street Englewood, CO 80111 |
| Kimberly S. Patmore | 6200 South Quebec Street Englewood, CO 80111 |