## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000001966

Entity Name: WESTERN UNION COMMUNICATIONS, INC.

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
6200 S. QUEBEC ST. GREENWOOD VILLAGE, CO 801114729 US						
Current Mailing Address:				New Mailing Address:		
			6200 S. QUEBEC ST. REGULATORY REPORTING SUITE 240 GREENWOOD VILLAGE, CO 80111 US			
FEI Number: 22-3268902 FEI Number Applied For ( ) FEI Number		FEI Nun	mber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 US  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		
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P/D () D JACKSON, JOSE 12500 E. MT. BEI ENGLEWOOD, C	LFORD AVE		Title: Name: Address: City-St-Zip:	COLE, ROYA 12500 E. BE	
Title: Name: Address: City-St-Zip:	GOLD, CHRISTIN 6200 S. QUEBEC			Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	SKENE-STIMAC, 6200 S. QUEBEC			Title: Name: Address: City-St-Zip:	AYRES, NICO 6200 S. QUE	
Title: Name: Address: City-St-Zip:	S () E SHAPIRO, DAVID 100 SUMMIT AVE MONTVALE, NJ (	· -		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	T () C SCHEIRMAN, SC 12500 E. MT. BEI ENGLEWOOD, C	LFORD AVENUE		Title: Name: Address: City-St-Zip:	SCHEIRMAN 12500 E. BE	(X) Change ()Addition I, SCOTT T ILFORD AVENUE DD, CO 80112
Title: Name: Address:	EVP () D SCHEIRMAN, SC 12500 E. MT. BEI	LFORD AVENUE		Title: Name: Address:	SCHEIRMAN 12500 E. BE	(X) Change ( ) Addition I, SCOTT T ILFORD AVENUE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: NICOLE M. AYRES AS 03/21/2006