

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000003106

1. Entity Name

DISCOVER FINANCIAL SERVICES, INC.

Principal Place of Business

Mailing Address

2500 LAKE COOK ROAD  
C/O TAX DEPT.. 1-N  
RIVERWOODS IL 60015

2500 LAKE COOK ROAD  
C/O TAX DEPT.. 1-N  
RIVERWOODS IL 60015-3851

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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

TITLE	C	<input type="checkbox"/> Delete
NAME	PURCELL, PHILIP J	
STREET ADDRESS	2500 LAKE COOK ROAD	
CITY-ST-ZIP	RIVERWOODS IL 60015	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	HODGES, WILLIAM L	
STREET ADDRESS	2500 LAKE COOK ROAD	
CITY-ST-ZIP	RIVERWOODS IL 60015	
TITLE	DV	<input type="checkbox"/> Delete
NAME	BELLOCK, MARGARET J	
STREET ADDRESS	2500 LAKE COOK ROAD	
CITY-ST-ZIP	RIVERWOODS IL 60015	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HAYDEN, HUGH M.	
STREET ADDRESS	2500 LAKE COOK ROAD	
CITY-ST-ZIP	RIVERWOODS IL	
TITLE	T	<input type="checkbox"/> Delete
NAME	FRANK, ALEXANDER C	
STREET ADDRESS	2 WORLD TRADE CENTER	
CITY-ST-ZIP	NEW YORK NY 10048	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	ADLER, DONALD N	
STREET ADDRESS	2500 LAKE COOK ROAD	
CITY-ST-ZIP	RIVERWOODS IL 60015	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D-EVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joseph A. Yob	
STREET ADDRESS	2500 Lake Cook Road	
CITY-ST-ZIP	Riverwoods, IL 60015	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DVPS	<input checked="" 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	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert M. Murphy	
STREET ADDRESS	2500 Lake Cook Road	
CITY-ST-ZIP	Riverwoods, IL 60015	

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:

Robert M. Murphy

Assistant Secretary

1/17/00

847/405-1179

Daytime Phone #

FILED  
Feb 07, 2000 8:00 am  
Secretary of State

02-07-2000 90012 019 \*\*\*150.00

710732



DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4020792

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**