2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

F95000003882 DOCUMENT

1. Entity Name

ADS ALLIANCE DATA SYSTEMS, INC.



FILED Apr 29, 2003 8:00 am Secretary of State

04-29-2003 90034 018 ***150.00

			No.						
17655 WATERVIEW PARKWAY 800		Mailing Address 800 TECHCENTER DRIVE GAHANNA OH 43230							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. 1	4. FEI Number 13-3163498			pplied For ot Applicable	7
Zip	Country	Zip	Country	5. (Certificate of Status Desired		8.75 Add	ditional	1
	6. Name and Address of Current Re	egistered Agent		7. 1	Name and Address of New Re	gistered A	gent		1
C T CODE	·	Name						1	
	PORATION SYSTEM ITH PINE ISLAND ROAD		Street Add	dress (P.O. B	ox Number is Not Acceptable)				1
PLANTATION FL 33324]
			City			FL	Zip Cod	le	1
	named entity submits this statement for titions of registered agent.	he purpose of changing its re	gistered office or re	egistered ag	ent, or both, in the State of Flor	ida. I am fai	miliar with,	and accept	1
SIGNATURE .	Signature, typed or printed name of registered agent and	Hills if conficeble (NOTE: P	registered Agent signature			DATE		 	
	Signature, typed or printed traine or registered agent and	Title II applicable: (NOTE: H	agistaled Agent signatore	a required when re	T				4
FILE NOW!!! FEE IS \$150.00					9. Election Campaign Fina	encina	\$5 C	0 May Be	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of		itata			Trust Fund Contribution			to Fees	
10.	OFFICERS AND D		11.	۸۵	DITIONS/CHANGES TO OFFIC	SEBS AND E	NECTOR	C IN 11	4
TITLE	PCEO	Delete	TITLE	AU	UTTONS/CHANGES TO OFFIC		☐ Change	Addition	1 5
NAME	PARKS, MICHAEL J	Delete	NAME			,	Onlings	Nocition	}
STREET ADDRESS	17655 WATERVIEW PARKWAY		STREET ADDRESS						
CITY-ST-ZIP	DALLAS TX 75252		CITY-ST-ZIP						ا ز
TITLE	ν	☐ Delete	TITLE ,			1	☐ Change	Addition	ۇ [
NAME	SCHUMACHER, RICHARD E JR		NAME						Ι,
STREET ADDRESS	800 TECHCENTER DR		STREET ADDRESS						
CITY-ST-ZIP	GAHANNAM OH 43230		CITY-ST-ZIP						_
TITLE	S	☐ Delete	TITLE		-	[☐ Change	☐ Addition	
NAME	UTAY, ALAN M	·	NAME						
STREET ADDRESS CITY-ST-ZIP	17655 WATERVIEW PKWY		STREET ADDRESS CITY-ST-ZIP						
	DALLAS TX 75252			•	 	 ,			4
TITLE NAME	V DELTT MICHAEL A	☐ Delete	TITLE NAME			l	Change	☐ Addition	
STREET ADDRESS	BELTZ, MICHAEL A 17655 WATERVIEW PARKWAY		STREET ADDRESS						
CITY-ST-ZIP	DALLAS TX 75252		CITY-ST-ZIP						
TITLE	D	□ Delete	TITLE		•	r	☐ Change	Addition	1
NAME	MINICUCCI, ROBERT	T Delete	NAME			L	challys	La Modifiell	
STREET ADDRESS	320 PARK AVENUE STE 2500	,	STREET ADDRESS						
CITY-ST-ZIP	NEW YORK NY 10022-6815		CITY-ST-ZIP		,				

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

ANDERSON, BRUCE

320 PARK AVENUE STE 2500

NEW YORK NY 10022-6815

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Change

Addition