

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000004510

1. Entity Name

COMDATA TELECOMMUNICATIONS SERVICES, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90160 044 ***150.00

Principal Place of Business

Mailing Address

5301 MARYLAND WAY
BRENTWOOD TN 37027

TAX DEPT HONIZA
8100 34TH AVE SO
MINNEAPOLIS MN 55425-1672
US

2. Principal Place of Business

3. Mailing Address

3311 E. OLD SHAKOPEE RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MINNEAPOLIS MN

Zip

Country

Zip

Country

55425

HENNEPIN

4. FEI Number

62-1605719

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCEO
HOLCOMBE, TONY G
5301 MARYLAND WAY
BRENTWOOD TN 37027 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HARRIS, CHARLES P
5301 MARYLAND WAY
BRENTWOOD TN ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JASON GRISKA VICE PRESIDENT
5301 MARYLAND WAY
BRENTWOOD TN 37207 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
KRIBBS, ROBERT E
5301 MARYLAND WAY
BRENTWOOD TN ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WOLVERSON, DAVID
5301 MARYLAND WAY
BRENTWOOD TN ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DAVID WOLVERTON ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SRVP
SHERIDAN, MICHAEL W
5301 MARYLAND AVE
BRENTWOOD TN ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
MOEN, D T
8100 34TH AVE SO
MINNEAPOLIS MN 55425 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00

952-853-3488

Date

Daytime Phone #

CR2E034 (9/99)