

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

DOCUMENT # **F96 000001217**

1. Entity Name

--- AMENDED ---

Progeny Marketing Innovations Inc.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
03 OCT -9 PM 2:45

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

400 Duke Drive

Suite, Apt. #, etc.

3. Mailing Address

400 Duke Drive

Suite, Apt. #, etc.

City & State  
Franklin, TN

City & State  
Franklin, TN

Zip  
37067

Country  
USA

Zip  
37067

Country  
USA

4. FEI Number  
06-1282786

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Corporation Service Company

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

1201 Hays Street

City Tallahassee

FL

Zip Code  
32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Maureen Cullen, Asst. V.P.*

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

(NOTE: Registered Agent signature required when reissuing)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. **Certain** OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
President and CEO  
Daniel Tarantin  
400 Duke Drive  
Franklin, TN 37067

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
Vice President  
David Ford  
400 Duke Drive  
Franklin, TN 37067

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
Assistant Secretary  
David Newman  
400 Duke Drive  
Franklin, TN 37067

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
Director  
David Kelley  
400 Duke Drive  
Franklin, TN 37067

TITLE  
NAME  
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CITY-STATE-ZIP

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CITY-STATE-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Lynn A. Feldman*

Lynn A. Feldman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/26/03

Date

973-496-2633

Daytime Phone #

CR2E034B (12/02)



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 272299 7155110

AUTHORIZATION :

*Patricia Pigato*

COST LIMIT : \$ 61.25

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ORDER DATE : October 8, 2003

ORDER TIME : 11:01 AM

ORDER NO. : 272299-005

CUSTOMER NO: 7155110

CUSTOMER: Karen Curry  
Cendant Corporation  
1 Campus Drive

Parsippany, NJ 07054  
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AMENDED UNIFORM BUSINESS REPORT

NAME: PROGENY MARKETING INNOVATIONS  
INC.

XX Amended Uniform Business Report

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 1155

EXAMINER'S INITIALS: \_\_\_\_\_