

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001840

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: FIRST CARD CORPORATION

## Current Principal Place of Business:

301 SOUTH COLLEGE STREET  
CHARLOTTE, NC 28288501

## New Principal Place of Business:

## Current Mailing Address:

C/O CORPORATION SERVICE COMPANY  
2711 CENTERVILLE ROAD, SUITE 400  
WILMINGTON, DE 19808

## New Mailing Address:

FEI Number: 56-1928887      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: SYMONS, SUSAN  
Address: 1525 WT HARRIS BLVD  
City-St-Zip: CHARLOTTE, NC 28262

Title: D ( ) Delete  
Name: JENKINS, BENJAMIN P  
Address: ONE WACHOVIA CENTER  
City-St-Zip: CHARLOTTE, NC 28288

Title: D ( ) Delete  
Name: SUTTON, CECE G  
Address: THREE WACHOVIA CENTER  
City-St-Zip: CHARLOTTE, NC 28288

Title: VP ( ) Delete  
Name: MULLIS, CAROL R  
Address: 301 S COLLEGE ST  
City-St-Zip: CHARLOTTE, NC 28288

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: MITCHELL, APRILLE M  
Address: 301 S COLLEGE ST  
City-St-Zip: CHARLOTTE, NC 28288

I hereby certify that the information supplied with this filing does not qualify 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: APRILLE M MITCHELL

VP

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date