

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

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90773 020 ***150.00

DOCUMENT # **F98000006330** ✓

1. Entity Name

First Data Pos Inc.

DO NOT WRITE IN THIS SPACE

641678

2. Principal Place of Business

6200 S. Quebec Str.

3. Mailing Address

6200 S. Quebec Str.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

AS 210

DO NOT WRITE IN THIS SPACE

City & State

Greenwood Village CO

City & State

Greenwood Village CO

4. FEI Number

58-1546395

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**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

32301-2525

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 date if applicable.

(NOTE: Registered Agent signature required when not dated)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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 Director/President
NAME Pamela Patsley
STREET ADDRESS 3811 Turtle Creek Blvd Suite 750
CITY-ST-ZIP Dallas TX 75219

TITLE Director/Secretary
NAME Michael Whealy
STREET ADDRESS 10825 Old Mill Road
CITY-ST-ZIP Omaha NE 68154

TITLE Treasurer
NAME Mark E. Young
STREET ADDRESS 5660 New Northside Drive
CITY-ST-ZIP Atlanta GA 30328

TITLE Assistant Secretary
NAME Phyllis Skene-Stimac
STREET ADDRESS 6200 S. Quebec Str.
CITY-ST-ZIP Greenwood Village CO 80111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP See attached list

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other line empowered.

SIGNATURE: *Phyllis Skene-Stimac* Phyllis Skene-Stimac April 11 2002 303 967 7147

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)