

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005939

FILED
Apr 29, 2009
Secretary of State

Entity Name: SUPERIOR BANKCARD SERVICE LLC

Current Principal Place of Business:

C/O INTUIT INC., ATTN: GINA GAXIOLA
2700 COAST AVENUE
MOUNTAIN VIEW, CA 94043

New Principal Place of Business:

2700 COAST AVENUE
MOUNTAIN VIEW, CA 94043

Current Mailing Address:

C/O CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

New Mailing Address:

2700 COAST AVENUE
MOUNTAIN VIEW, CA 94043

FEI Number: 30-0305788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: INNOVATIVE MERCHANT SOLUTIONS LLC
Address: C/O INTUIT INC., 2700 COAST AVENUE
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: P () Delete
Name: WISE, PAUL
Address: C/O INTUIT INC., 2700 COAST AVENUE
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: VP () Delete
Name: HANK, JEFFREY P
Address: 2700 COAST AVENUE
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: VP () Delete
Name: LAWSON, ROBERT
Address: 2700 COAST AVENUE
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: S () Delete
Name: COZZENS, TYLER R
Address: 2700 COAST AVENUE
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: AS () Delete
Name: LAIDLAW, JEANNETTE C
Address: 2700 COAST AVENUE
City-St-Zip: MOUNTAIN VIEW, CA 94043

ADDITIONS/CHANGES:

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

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TYLER R. COZZENS

S

04/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date