

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000050275

1. Entity Name
FLEETCARD SYSTEMS, INC.



Principal Place of Business
606 NORTH MAGNOLIA AVENUE
OCALA, FL 34475

Mailing Address
P.O. BOX 849
OCALA, FL 34478-0849



04302007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3647896

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CLARDY, JOHN S JR.
606 NORTH MAGNOLIA AVENUE
OCALA, FL 34475

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME CLARDY, JOHN S JR.
STREET ADDRESS 606 NORTH MAGNOLIA AVENUE
CITY-ST-ZIP Ocala, FL 34475

TITLE D
NAME LEWIS, JAMES A
STREET ADDRESS 931 NORTH S.R. 434 #1201
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE D
NAME JACKSON, DENNIS K
STREET ADDRESS 2655 SIMS ROAD
CITY-ST-ZIP SHELBYVILLE, TN 37160

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000753676
05/22/07-80031-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John S Clardy Jr JOHN S CLARDY JR PRESIDENT, 4/30/07 (352)622-7161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR