## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000096423

Entity Name: CERTEGY GLOBAL CARD SERVICES, INC.

FILED Mar 21, 2005 Secretary of State

Current Pr	incipal Plac	e of Business:	New Prince	New Principal Place of Business:		
11601 ROOSEVELT BOULEVARD TA-41			11720 AME SUITE 600	11720 AMBER PARK DRIVE		
ST. PETERSBURG, FL 33716				ALPHARETTA, GA 30004		
Current Mailing Address:			New Maili	New Mailing Address:		
11720 AMBER PARK DR STE 600 ALPHARETTA, GA			STE 600	11720 AMBER PARK DR STE 600 ALPHARETTA, GA 30004		
FEI Number: 58-2652375 FEI Number Applied For ( ) FEI N		FEI Number Not Appl	mber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US  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 Cam		ng Trust Fund Contribution ( ).	L		Date	
	AND DIREC	• , ,	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	TOWE, LARRY 11601 ROOSE ST.PETERSBU  DVPS ( KORCHUN, W. 11601 ROOSE ST.PETERSBU  VCFO ( VOLOMMER, I 1720 AMBER I ALPHARETTA,	EVELT BLVD N URG, FL 33716  ) Delete ALTER M EVELT BLVD N URG, FL 33716  ) Delete MICHAEL PARTK , STE 600 GA 30004  ) Delete	Title: Name: Address: City-St-Zip:	TOWE, LARRY 100 SECOND A ST.PETERSBUI  VPSD (X) KORCHUN, WA 100 SECOND A ST.PETERSBUI  VPD (X) VOLOMMER, M 1720 AMBER P ALPHARETTA, (X)  VPT (X) SAX, MICHAEL	AVENUE SOUTH, SUITE 1100S RG, FL 33701  O Change ( ) Addition LITER M AVENUE SOUTH, SUITE 1100S RG, FL 33701  O Change ( ) Addition IIICHAEL T ARTK, STE 600 GA 30004  O Change ( ) Addition	
City-St-Zip:	ST.PETERSBU	JRG, FL 33716	City-St-Zip:	ST.PETERSBUI	•	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: GARY M. WILBANKS VP 03/21/2005

WILBANKS, GARY M

ALPHARETTA, GA 30004

11720 AMBER PARTK . STE 600

Name:

Address:

City-St-Zip: