2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12116

Entity Name: COMDATA NETWORK, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
5301 MARY	LAND WAY OD, TN 37027			•		
Current Mailing Address:			New Mailir	New Mailing Address:		
3311 E. OLD SHAKOPEE RD MINNEAPOLIS, MN 55425						
FEI Number:	62-0813252	FEI Number Applied For()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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:						
		Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP ()[ADAM, JURGEN 3311 E OLD SHA MINNEAPOLIS, N	KOPEE RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VT () I KRIBBS, ROBER 5301 MARYLANI BRENTWOOD, T	O WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VS () I SHERIDAN, MICI 5301 MARYLANI BRENTWOOD, T	O WAY	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition SHERIDAN, MICHAEL W 5301 MARYLAND WAY BRENTWOOD, TN 37027		
Title: Name: Address: City-St-Zip:	VD () I PITMAN, J R 5301 MARYLANI BRENTWOOD, T) WAY	Title: Name: Address: City-St-Zip:	VS (X) Change () Addition PEERMAN, LISA E 5301 MARYLAND WAY BRENTWOOD, TN 37027		
Title: Name: Address: City-St-Zip:	PD () I RODEWALD, BR 5301 MARYLANI BRENTWOOD, T	O WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	AS () I PIEHLER-SHAW 3311 E OLD SHA MINNEAPOLIS, M	KOPEE RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: KAREN PIEHLER-SHAW AS 04/24/2009