

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27108

Entity Name: FISERV CIR, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

255 FISERV DRIVE
BROOKFIELD, WI 53045 US

New Principal Place of Business:

Current Mailing Address:

255 FISERV DRIVE
BROOKFIELD, WI 53223 US

New Mailing Address:

FEI Number: 13-2978921

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 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: WARSOP, THOMAS J III
Address: 255 FISERV DRIVE
City-St-Zip: BROOKFIELD, WI 53045

Title: S () Delete
Name: SPRAGUE, CHARLES W
Address: 255 FISERV DR
City-St-Zip: BROOKFIELD, WI 53045

Title: VT () Delete
Name: HIRSCH, THOMAS J
Address: 255 FISERV DR
City-St-Zip: BROOKFIELD, WI 53045

Title: PD () Delete
Name: YABUKI, JEFFERY W
Address: 255 FISERV DR
City-St-Zip: BROOKFIELD, WI 53045

Title: V () Delete
Name: NEILL, THOMAS A
Address: 255 FISERV DR
City-St-Zip: BROOKFIELD, WI 53045

Title: V () Delete
Name: GUPTA, RAHUL
Address: 255 FISERV DRIVE
City-St-Zip: BROOKFIELD, WI 53045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 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: CHARLES W. SPRAGUE

S

04/21/2009

Electronic Signature of Signing Officer or Director

Date