


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90068 022 ***150.00

DOCUMENT # P95000007231					
1. Entity Name WILDCARD SYSTEMS, INC.					
Principal Place of Business 1601 SAWGRASS CORP. PARKWAY SUITE 300 SUNRISE, FL 33323 US			Mailing Address 1601 SAWGRASS CORP. PARKWAY SUITE 300 SUNRISE, FL 33323 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0556600	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAUTTER, C. CHRISTIAN ESQ. 2850 NORTH ANDREWS AVENUE FT LAUDERDALE, FL 33311				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO WALSH, PAUL 8501 N SCOTTSDALE RD #300 SCOTTSDALE, AZ 85253	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4900 N. Scottsdale Rd. Ste. 1000 Scottsdale, AZ 85251	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO GRESHAM, GEORGE 8501 N SCOTTSDALE RD #300 SCOTTSDALE, AZ 85253	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4900 N. Scottsdale Rd. Ste. 1000 Scottsdale, AZ 85251	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV COLEMAN, STEVEN 8501 N SCOTTSDALE RD #300 SCOTTSDALE, AZ 85253	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4900 N. Scottsdale Rd. Ste. 1000 Scottsdale, AZ 85251	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FISHBACH, STEVEN 8501 N SCOTTSDALE RD #300 SCOTTSDALE, AZ 85253	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4900 N. Scottsdale Rd. Ste. 1000 Scottsdale, AZ 85251	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KIM, JULIET 8501 N SCOTTSDALE RD #300 SCOTTSDALE, AZ 85253	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Juliet Kim 4900 N. Scottsdale Rd. Ste. 1000 Scottsdale, AZ 85251	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: _____			George Gresham 5/1/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Day and Phone #		