

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000007231

FILED
Apr 13, 2010
Secretary of State

Entity Name: WILDCARD SYSTEMS, INC.

Current Principal Place of Business:

1601 SAWGRASS CORPORATE PARKWAY
SUITE 300
SUNRISE, FL 33323 US

New Principal Place of Business:

1601 SAWGRASS CORPORATE PARKWAY SUITE 300
SUNRISE, FL 33323

Current Mailing Address:

1601 SAWGRASS CORPORATE PARKWAY
SUITE 300
SUNRISE, FL 33323 US

New Mailing Address:

1601 SAWGRASS CORPORATE PARKWAY SUITE 300
SUNRISE, FL 33323

FEI Number: 65-0556600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PDIR
Name: NORCROSS, GARY A PDIR
Address: 1601 SAWGRASS CORPORATE PARKWAY SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: VP
Name: DAVEY, MARK PHILIP VP
Address: 1601 SAWGRASS CORPORATE PARKWAY SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: EVPS
Name: COOK, RONALD D EVPSEC
Address: 1601 SAWGRASS CORPORATE PARKWAY SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: EVPD
Name: SCANLON, GEORGE P EVPCFOD
Address: 1601 SAWGRASS CORPORATE PARKWAY SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: DIR
Name: GRAVELLE, MICHAEL L DIR
Address: 1601 SAWGRASS CORPORATE PARKWAY SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: ASEC
Name: BURGESS, DEBRA H ASEC
Address: 1601 SAWGRASS CORPORATE PARKWAY SUITE 300
City-St-Zip: SUNRISE, FL 33323

I hereby 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 all other like empowered.

SIGNATURE: KELLY LETTMANN

POA

04/13/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date