

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002714

Entity Name: PROVIDIAN BANCORP SERVICES, INC.**Current Principal Place of Business:**10 SOUTH DEARBORN STREET, IL1 - 0502
CHICAGO, IL 60603**Current Mailing Address:**10 SOUTH DEARBORN STREET, IL1 - 0502
CHICAGO, IL 60603 US**FEI Number:** 94-3055127**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title SECRETARY
Name JORDAN, AFIYA M.
Address 10 SOUTH DEARBORN STREET, IL1 - 0502
City-State-Zip: CHICAGO IL 60603

Title DIRECTOR
Name PAX, ANNE F
Address 10 SOUTH DEARBORN STREET, IL1 - 0502
City-State-Zip: CHICAGO IL 60603

Title CEO, DIRECTOR AND PRESIDENT
Name COUNTRYMAN, CARLA L
Address 10 SOUTH DEARBORN STREET, IL1 - 0502
City-State-Zip: CHICAGO IL 60603

Title TREASURER
Name MANOLA, ELLEN J
Address 10 SOUTH DEARBORN STREET, IL1 - 0502
City-State-Zip: CHICAGO IL 60603

Title DIRECTOR
Name ANSIEL, GLENN EDWARD
Address 10 SOUTH DEARBORN STREET, IL1 - 0502
City-State-Zip: CHICAGO IL 60603

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: CARLA L COUNTRYMAN**CHIEF EXECUTIVE
OFFICER, DIRECTOR AND
PRESIDENT****04/13/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date