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| <b>SCC eFile</b> | <b>2016 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | 216524397 |
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|  |   |       |            |        |             |
|--|---|-------|------------|--------|-------------|
| 1.) CORPORATION NAME:<br><b>Total System Services, Inc.</b>  | DUE DATE: <b>6/30/2016</b>  |       |            |        |             |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CT CORPORATION SYSTEM<br/>4701 COX ROAD, SUITE 285<br/>GLEN ALLEN, VA</b> | SCC ID NO: <b>F0431470</b>  |       |            |        |             |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>HENRICO COUNTY</b>   | 5.) STOCK INFORMATION<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>600,000,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 600,000,000 |
| CLASS  | AUTHORIZED  |       |            |        |             |
| COMMON   | 600,000,000   |       |            |        |             |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>GA</b>  |   |       |            |        |             |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE TSYS WAY  
P O BOX 2506

CITY/ST/ZIP: COLUMBUS, GA 31901

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|   |                                     |         |                                     |          |
|---|-------------------------------------|---------|-------------------------------------|----------|
| NAME: M TROY WOODS<br>TITLE: PRESIDENT<br>ADDRESS: ONE TSYS WAY<br>CITY/ST/ZIP/CO: COLUMBUS, GA 31901 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|-------------------------------------|----------|

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: G SANDERS GRIFFITH<br>TITLE: GC/S<br>ADDRESS: ONE TSYS WAY<br>CITY/ST/ZIP/CO: COLUMBUS, GA 31901 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
|--|-------------------------------------|---------|--------------------------|----------|

|   |                                     |         |                          |          |
|---|-------------------------------------|---------|--------------------------|----------|
| NAME: ERIC R LAFORGE<br>TITLE: TAX OFFICER<br>ADDRESS: ONE TSYS WAY<br>CITY/ST/ZIP/CO: COLUMBUS, GA 31901 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|--------------------------|----------|

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: PAUL TODD<br>TITLE: CFO<br>ADDRESS: ONE TSYS WAY<br>CITY/ST/ZIP/CO: COLUMBUS, GA 31901 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
|--|-------------------------------------|---------|--------------------------|----------|

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |           |
|---|----------------------------------|-----------|
| /s/ M TROY WOODS                                    | M TROY WOODS, PRESIDENT          | 6/28/2016 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.