

1.) CORPORATION NAME:

Rewards Network Establishment Services Inc.

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1482191**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: EXECUTIVE OFFICES
2 N RIVERSIDE PLAZA STE 200

CITY/ST/ZIP: CHICAGO, IL 60606

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RONALD L BLAKE	
TITLE:	PRESIDENT	
ADDRESS:	2 N. RIVERSIDE PLAZA #200	
CITY/ST/ZIP/CO:	CHICAGO, IL 60606	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	EVAN KM MAKELA	
TITLE:	SECRETARY	
ADDRESS:	2 N. RIVERSIDE PLAZA #200	
CITY/ST/ZIP/CO:	CHICAGO, IL 60606	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHANE S KERN	
TITLE:	TREASURER	
ADDRESS:	2 N. RIVERSIDE PLAZA #200	
CITY/ST/ZIP/CO:	CHICAGO, IL 60606	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MEGAN E FLYNN	
TITLE:	VICE PRESIDENT	
ADDRESS:	2 N. RIVERSIDE PLAZA #200	
CITY/ST/ZIP/CO:	CHICAGO, IL 60606	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ANDRE L ZARDINI	
TITLE:	VICE PRESIDENT	
ADDRESS:	2 N. RIVERSIDE PLAZA #200	
CITY/ST/ZIP/CO:	CHICAGO, IL 60606	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	EDWARD A JOB	
TITLE:	VICE PRESIDENT	
ADDRESS:	2 N. RIVERSIDE PLAZA #200	
CITY/ST/ZIP/CO:	CHICAGO, IL 60606	

NAME:	MARIA CHRISTINA B. SMOLEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	2 N. RIVERSIDE PLAZA #200		
CITY/ST/ZIP/CO:	CHICAGO, IL 60606		

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/ EVAN KM MAKELA	EVAN KM MAKELA, SECRETARY	8/23/2012
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.