

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214510340

1.) CORPORATION NAME:

**Aimia Proprietary Loyalty U.S. Inc.**

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1816414**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1405 XENIUM LANE N  
STE 150

CITY/ST/ZIP: PLYMOUTH, MN 55441

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:	MICHAEL L ZEA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1405 XENIUM LANE N		
	STE 150		
CITY/ST/ZIP/CO:	PLYMOUTH, MN 55441		

NAME:	TIMOTHY J MARTIN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1405 XENIUM LANE		
CITY/ST/ZIP/CO:	PLYMOUTH, MN 55441		

NAME:	BONITA B BOISNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1405 XENIUM LANE		
CITY/ST/ZIP/CO:	PLYMOUTH, MN 55441		

NAME:	JOHN H LEARY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2800 LIVERNOIS #600		
CITY/ST/ZIP/CO:	TROY, MI 48083		

NAME:	PATRICIA E SAARI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1405 XENIUM LANE		
CITY/ST/ZIP/CO:	PLYMOUTH, MN 55441		

NAME:	ERIC A WYMORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1405 XENIUM LANE N		
	STE 150		
CITY/ST/ZIP/CO:	PLYMOUTH, MN 55441		

NAME: DAVID L ADAMS  OFFICER  DIRECTOR  
TITLE: DIRECTOR  
ADDRESS: 5100 BOULEVARD DE MAISONNEUVE WEST  
CITY/ST/ZIP/CO: , , FN

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.

<u>/s/ TIMOTHY J MARTIN</u>	<u>TIMOTHY J MARTIN, VICE</u>	<u>2/25/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.