

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214527086

1.) CORPORATION NAME:

VISA DIGITAL SERVICES, INC.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
1111 E MAIN ST 16TH FL
BANK OF AMERICA CENTER**

SCC ID NO: **F1895988**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 900 METRO CENTER BLVD

CITY/ST/ZIP: FOSTER CITY, CA 94404

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:	THOMAS A M'GUINNESS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	900 METRO CENTER BLVD		
CITY/ST/ZIP/CO:	FOSTER CITY, CA 94404		

NAME:	MINHDUNG THUY TA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	900 METRO CENTER BLVD		
CITY/ST/ZIP/CO:	FOSTER CITY, CA 94404		

NAME:	PAMELA C LILLQUIST	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	900 METRO CENTER BLVD		
CITY/ST/ZIP/CO:	FOSTER CITY, CA 94404		

NAME:	ARIELA ST. PIERRE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	900 METRO CENTER BLVD		
CITY/ST/ZIP/CO:	FOSTER CITY, CA 94404		

NAME:	JOHN BLACK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	900 METRO CENTER BLVD		
CITY/ST/ZIP/CO:	FOSTER CITY, CA 94404		

NAME:	BYRON H. POLLITT JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	900 METRO CENTER BLVD		
CITY/ST/ZIP/CO:	FOSTER CITY, CA 94404		

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/ ARIELA ST. PIERRE	ARIELA ST. PIERRE, SECRETARY	5/27/2014
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.		