



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 121056		2. Name of Corporation ADS Commercial Services, Inc.			
3. Street Address Principal Business Office 17655 Waterview Parkway			City Dallas	State TX	Zip 75252
4. Business Phone No. 972-348-5100		5. State of Incorporation Delaware			
6. Brief Description of the Character of Business Conducted in Rhode Island Purpose of Making Loans to Commercial Entities Through The Use of Proprietary Fleetcard Programs and Supplying Those Entities With Operational Tracking Reports					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dwayne H. Tucker			Vice President Name Richard E. Schumacher, Jr.		
Street Address 17655 Waterview Parkway			Street Address 3100 Easton Square Place		
City Dallas	State TX	Zip 75252	City Columbus	State OH	Zip 43219
Secretary Name Alan M. Utay			Treasurer Name Robert P. Armiak		
Street Address 17655 Waterview Parkway			Street Address 3100 Easton Square Place		
City Dallas	State TX	Zip 75252	City Columbus	State OH	Zip 43219
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Dwayne H. Tucker			Director Name Alan M. Utay		
Street Address 17655 Waterview Parkway			Street Address 17655 Waterview Parkway		
City Dallas	State TX	Zip 75252	City Dallas	State TX	Zip 75252
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	Common	\$0.01 Par Value	1,000	Common	\$0.01
			THIS SECTION MUST BE COMPLETED		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

FEB 29 2008

By 644577

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

R. E. Schumacher, Jr., CPA 2-13-08
Signature Date

R. E. Schumacher, Jr., CPA
Print or Type Name Senior Vice President

Title

File Date _____
Check No. _____
By: _____
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