

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34206

Entity Name: REWARDS NETWORK INC.

Current Principal Place of Business:

2 NORTH RIVERSIDE PLAZA
SUITE 200
CHICAGO, IL 60606

Current Mailing Address:

2 NORTH RIVERSIDE PLAZA
SUITE 200
CHICAGO, IL 60606 US

FEI Number: 84-6028875

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHIEF LEGAL OFFICER
Name KAUFFMAN, ROBERT
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title CFO
Name JANEK, DAVID
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title ASSISTANT TREASURER
Name HUBER, BETH
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title PRESIDENT
Name FUSCO, STEPHEN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title CEO
Name EGER, EDMOND
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name WINOKUR, DAVID
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name FREIBERG, STEVEN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name EGER, EDMOND
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALICE LIN GEENE

SECRETARY

04/24/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BILZIN, JONATHAN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT
Name GEENE, ALICE LIN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title SECRETARY
Name GEENE, ALICE LIN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title GENERAL COUNSEL
Name GEENE, ALICE LIN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606

Title CORPORATE AFFAIRS
Name GEENE, ALICE LIN
Address 2 NORTH RIVERSIDE PLAZA
SUITE 200
City-State-Zip: CHICAGO IL 60606