


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # F05000004791


1. Entity Name
MERCHANTSERVICE.COM, INC.



Principal Place of Business Mailing Address

373 INTERSTATE BLVD **373 INTERSTATE BLVD**
SARASOTA, FL 34240 **SARASOTA, FL 34240**

DO NOT WRITE IN THIS SPACE



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3255115	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

KAUZLARICH, EUGENE S. GINO
373 INTERSTATE BLVD
SARASOTA, FL 34240

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000799609
 01/30/08-80073-007 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES KAUZLARICH, EUGENE S. GINO 988 BLVD. OF THE ARTS, SUITE 509 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCS RENNER, JULIE L 988 BLVD. OF THE ARTS, SUITE 509 SARASOTA, FL 34236
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 207, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Eugene S. Gino* Date: *1/21/08* Daytime Phone #: *941-371-1666 x4014*