

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 07, 2008 8:00 am**  
**Secretary of State**

02-07-2008 90089 049 \*\*\*138.75

DOCUMENT # M06000003356 1. Entity Name MERCHANT CLEARING HOUSE, LLC	
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Principal Place of Business 14100 SAN PEDRO AVE SUITE 750 SAN ANTONIO, TX 78232	Mailing Address 14100 SAN PEDRO AVE SUITE 750 SAN ANTONIO, TX 78232
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**DO NOT WRITE IN THIS SPACE**



01082008No Chg-LLC CR2E083 (12/07)

4. FEI Number 41-2149591	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 CAPITOL CORPORATE SERVICES, INC.  
 155 OFFICE PLAZA DR.  
 SUITE A  
 TALLAHASSEE, FL 32301

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GIBSON, JERRY D 3801 E PLANO PARKWAY, #100 PLANO, TX 75047
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, MICHAEL R <del>10102 EVANSTON</del> 5719-173 LUBBOCK, TX 79424
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 1-29-08 Daytime Phone #: 210-495-0404