2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2010
Secretary of State

DOCUMENT# N04000008430

Entity Name: CARD SYSTEMS CARES INC.

Current Principal Place of Business:

1721 SE 47TH TERRACE
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

1721 SE 47TH TERRACE
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 61-1475903 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPARY, CHANDRA
1721 SE 47TH TERRACE
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: SPARY, CHANDRA M
Address: 1721 SE 47TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904 US

Title: DIR
Name: SPARY, CHANDRA M
Address: 1721 SE 47TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904 US

Title: DIR
Name: AUGER, SHERI
Address: 1721 SE 47TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904 US

Title: DIR
Name: OSELETT, LINDA
Address: 1721 SE 47TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHANDRA SPARY PRES 02/17/2010

Electronic Signature of Signing Officer or Director Date